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AUTHOR Guthrie, Larry F.; And Others
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ABSTRACT

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Portraits of Interagency Collaboration

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Far West Laboratory for Educational Research and Development
730 Harrison Street, San Francisco, CA 94107-1242 (415) 565-3000

PORTRAITS OF INTERAGENCY COLLABORATION

Larry F. Guthrie,
Bonnie L. Scott,
Grace Pung Guthrie,
&
Julie Z. Aronson

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TABLE OF CONTENTS

Abstract i

Introduction 1
Overview of this Report 3

Children's Cabinet, Inc.; Reno, NV 5
Overview 5
Programs and Services 5
Critical Features 7
Co-Location of Programs 7
Increasing the Capacity of Other Agencies and Programs 8
Strong Linkages with the Schools 9
Keys to Success 10
Leadership 11
High Profile of the Children's Cabinet 11
Funding and Financial Independence 11
The Cabinet's Role in Creating Systemic Change 12
Challenges 13
Viability of the Capacity-Building Strategy 13
Relationships with Other Nonprofit Organizations 14
Diversifying the Board 15
Replication 15

Participating Partners of EIESS; Provo, UT 16
Overview 16
Critical Features 17
Programs and Services 17
Case Management 19
Cross-Training 21
Strategies for Improving Service Delivery 22
Keys to Success 24

The Murphy Family Center - Murphy School District; Phoenix, AZ 26
Overview 26

Programs and Services 26
Critical Features 29
The School as the "Hub of the Community" 29
Development of the Vision 31
Challenges 32
Building Family Self-Sufficiency 32
Case Management 33

Page High School Student Services Program; Page, AZ 34
Overview 34
Critical Features 35
Roundtable 35
Student Study Teams 37
In-School Suspension 38
Rural Informality 39
Cross-Cultural Interagency Collaboration 39
Challenges 39
Rural Isolation 39
High Staff Turnover Rates 40
Jurisdictional Restrictions 40
Cultural Diversity 41

Coordinated Youth Services Council; San Rafael, CA 42
Overview 42
Critical Features 43
Case Review Process 43
Benefits 44
Intensive Case Management System 44
Selection and Role of the Leads Case Manager 46
Purchase of Goods and Services for Families 47
Co-Location of Staff 47
Concurrent Supervision 48
Interagency Information-Sharing 49
Challenges 50
Securing Future Funding 50
Choosing an Interagency Staffing Model 50
Addressing Staff Workloads and Stress 51

References 52

Stories:
Joyce Brown's Story 9-10
Debbie Reeder's story 20-21
Laura's Story 30
Mrs. Lopez's Story 32
Emily's Story 37-38
Victoria's Story 40

Edouardo's Story 45-46

Exhibits:

Exhibit 1: Program Characteristics/Strategies 4
Exhibit 2: Programs and Services (Children's Cabinet, Inc.) 6
Exhibit 3: Programs and Services (Participating Partners) 18
Exhibit 4: Programs and Services (Murphy Family Center) 28

INTRODUCTION

American schools in the nineties are largely ill-equipped to provide the kinds of services and assistance that will meet the needs of all their students. The stresses of poverty, hunger, or family violence, and the powerful influences of gangs or drugs in the community, are taking a terrible toll on children. Changes in the kinds of needs children bring to school have placed additional burdens on teachers and other school staff–burdens they are unable to bear alone.

Developing specialized programs for dropout prevention or crisis counseling may help in the short run, but to make a significant–and lasting–difference in the lives of children at risk, schools will have to reach beyond the conventional boundaries of public education, tapping into and mobilizing resources in the larger community.

A vast array of health and social service agencies serve children and youth at risk. These include the county welfare agencies, child protection agencies, juvenile courts, youth employment programs, health and mental health programs, child care programs, and early childhood development agencies. In California, for example, over 160 programs in 35 agencies and seven departments have been set up to serve children. But these agencies are not working together. Very often, they are compartmentalized, their services are overlapping and uncoordinated, and the children and families are not getting either the type or amount of services they need (G.P. Guthrie & L.F. Guthrie, 1991; L.F. Guthrie & Scott, 1992; Heath & McLaughlin, 1989; Hodgkinson, 1989; Kirst & McLaughlin, 1989; Schorr, 1989).

Consequently, there is a growing interest in coordinating and improving services for children through interagency collaboration. Many communities have set up procedures for interagency networking and information-sharing. Periodic meetings that bring together representatives of the various agencies help to establish communication and break down bureaucratic barriers. However, coordination of community-based organizations and social services must go beyond mere information-sharing if we are really going to reduce fragmentation and improve the quality of services. Communities need to think in terms of new interagency structures that will allow them to plan together (rather than separately), create horizontal (as well as vertical) linkages, develop mutual accountability systems, share funding of projects, and involve community members, parents, students, and businesses in

authentic ways (Gardner, 1989). The whole client, and the client's family, will have to become the central focus of interlocking and interdependent services (Hodgkinson, 1989).

Collaboratives of agencies employ at least five primary strategies to create more streamlined service delivery for children and families. Among these are case management, co-location of services, information-sharing, program development and cross-training. Each is described below. Any interagency collaborative typically uses a combination of strategies, as is shown in the descriptions of the five collaboratives in this report and summarized in Exhibit 1.

Case Management

One agency (or case management team) coordinates the services of several agencies and matches them with individual student/family needs.

The Coordinated Youth Services Council (CYSC) in San Rafael, California, a private, non-profit organization, illustrates a case management approach to collaboration. This coordination is facilitated in two ways: 1) CYSC coordinates weekly case review meetings in which representatives from several agencies in the community work together to develop service plans for the individual students and families they are serving; and 2) case managers from four public agencies have been brought on the CYSC site in order to implement the service plans and facilitate communication among case managers from different agencies.

Co-Location of Services

Services of various agencies are housed together (co-located) within or near a school or community center to increase access to services.

To increase access to services, relevant agency staff can be housed within or near the school or some other centrally-located building. This is the strategy used by the Department of Economic Security (DES) in Phoenix's Murphy Elementary School District. DES has placed 22 of its staff in a district building near the administrative offices. Each of the district's four elementary schools is nearby and makes referrals to the DES satellite office through a staff team consisting of a counselor, nurse and community worker.

Information-Sharing

Through periodic meetings and consistent communication, agencies stay informed about each other's services and the children and families served.

Sharing of information among agency workers facilitates service delivery. At Page High School in Page, Arizona, such communication is promoted through monthly round table discussions among school, social service, and law enforcement staff. Because Native Americans constitute much of the student population in this rural community, social service representatives from the nearby Navajo reservation are an invaluable presence in addressing the needs of this culturally-diverse population.

Program Development

Agencies collaborate to plan, develop, and coordinate new programs needed in the community.

The Children's Cabinet of Reno, Nevada, a private, non-profit agency, has facilitated the "co-location" of several programs and services at one site to promote coordination. Each program remains separate in terms of its administration and service delivery, but monthly multi-agency staff meetings keep all participants informed of the latest developments within each program.

Cross-Training

Agency workers are trained in the policies and procedures of other agencies or sub-departments in order to provide more flexible case management.

Participating Partners in Provo, Utah, cross-trains Department of Human Services (DHS) staff so that they can provide more broadly-focused services to families and reduce duplication of effort within the department. Typically, each line worker within an agency is responsible for a single program, even though there may be half a dozen programs within one department. In the Provo DHS however, the social worker has received training on the eligibility requirements and other regulations for virtually all the department's programs so that she can provide comprehensive case management for all Participating Partners families needing DHS services.

Overview of this Report

This report is based on a review of interagency collaboration within the states of Arizona, California, Nevada, and Utah. From an initial list of over 25 collaboratives, we conducted sites visits and telephone interviews with several and produced the report, *School-Linked Services in the Western Region*. We then chose five of these sites for further study. We selected these five sites to represent a variety of approaches to organizing and implementing school-community linkages. In addition, we chose sites that showed variation in demographic characteristics and geographic location within the four states.

All five sites were visited a second time for two days each, during which we interviewed key staff and community members, collected relevant documentation of the programs and observed relevant meetings.

This report contains brief case studies of these five interagency collaborations, which range from localized efforts that concentrate social services at a single school site, to county-wide coordination and management of services. For each site, we discuss the organization of the collaborative and the services provided, describing its critical components. We also analyze ways each program has overcome barriers to collaboration, consider reasons for their continuing success, and discuss the challenges they must face in the future.

PROGRAM CHARACTERISTICS/STRATEGIES

INTERAGENCY COLLABORATIVE	CASE MANAGEMENT	CO-LOCATION	INFORMATION-SHARING	PROGRAM DEVELOPMENT	CROSS-TRAINING
CHILDREN'S CABINET, INC.	No	Truancy, tutoring, counseling, child care, etc. are housed in the Children's Cabinet building	Interagency and intra-agency meetings held periodically Computer linked to school district	Develops programs in response to community needs, often in conjunction with public or non-profit agencies	No
PARTICIPATING PARTNERS	Case study teams provide coordinated case management	No	School and agency staff conduct weekly case team meetings	Developed Family Resource Center and summer school programs	Dept. of Family Services staff are cross-trained on programs within Dept. of Family Services
MURPHY FAMILY CENTER	Community workers offer informal case management	Department of Economic Security, Conocimiento, Valle de Sol, and Chicanos por La Casa at school/district sites	Roundtable of agencies, community workers, and Murphy Family Center staff convened periodically	District provides support for new programs, e.g., child care	Community workers formally trained on eligibility for assistance programs
PAGE HIGH SCHOOL	Student Study Teams review cases	No	School facilitates roundtable discussions between middle managers and line staff of public and private agencies	No	No
COORDINATED YOUTH SERVICES COUNCIL	Intensive case management of entire families by lead case manager Service plans developed by interagency case review team	Social Services, Probation, Mental Health, and Public Health staff on-site at CYSC	Information shared between agencies through client folders and weekly case review meetings Interagency database is being developed	No	Formal and informal training held across agencies and disciplines

CHILDREN'S CABINET, INC.
RENO, NEVADA

OVERVIEW

While not a large city by national standards, Reno is plagued by many big city problems, including high levels of violent crime, drug and alcohol abuse, unemployment, poverty, gang activity, homelessness, and school truancy. Nevada leads the nation in rates of population growth, incarceration, teenage pregnancy, and single-parent families, and is close to the top in rates of school drop-out, youth incarceration, child death, and permanent out-of-home placements for children. These problems, in the context of a conservative state with shrinking resources to invest in education and human services, have made the situation in Nevada a very dire one for children and families.

In response to these alarming statistics, concerned members of the business and human services communities in Washoe County began meeting to explore what could be done. They concluded that there were insufficient public services and even fewer private programs in place to adequately address the needs of children and families. In 1985, the Children's Cabinet was incorporated as a private-nonprofit organization. Governed by a Board of Trustees with prominent representatives from county and state agencies, private businesses, and civic leaders, the mission of the Children's Cabinet is to coordinate existing services for children and "fill in the gaps" between existing services and the needs of families.

In the seven years since it was conceived, the Children's Cabinet has evolved into a showcase of public/private collaboration, successfully coordinating, developing and operating a number of innovative programs for children and families (see Exhibit 2). It has also established its own foundation from a large endowment left by a wealthy community member, as well as the Children's Cabinet Institute, a think tank devoted to policy issues involving children's and family's issues in the state. The Children's Cabinet has added to the range and quality of services in the county, and appears to be having a dramatic impact on the service delivery system throughout the state.

PROGRAMS AND SERVICES

Operating from its own building (the Maud W. "Jill" Walker Family Resource

PROGRAMS AND SERVICES

NAME OF PROGRAM/SERVICE	CLIENTS	SERVICES PROVIDED
INFORMATION AND REFERRAL		
Centralized Assistance and Referral	Youths and their families	Crisis intervention Needs assessment Individual and family counseling Referrals Truancy services
Truancy Center	Truant youths and their families	Needs assessment Counseling Referrals
Child Care Resource Council	Families with children	Administers child care vouchers Child care information, referral, and advocacy Operates toy library
Parent Education Network	Families with children	Provides training in parent skills Information and referral on parenting education classes in the community
COUNSELING		
Status Offender Intervention Program	Youth "Status Offenders" and their families	Short-term family counseling
Family Preservation Program	Families with children (at risk of being removed from home)	Intensive in-home individual and family counseling Assistance, referral, and advocacy
School Early Intervention Program	Families with elementary school-aged children	Family therapy Needs assessment Assistance in accessing community resources Advocacy
Transition Youth Groups	Youths aged 12-16	Peer support groups facilitated by trained counselors
OUTREACH		
Reach for the Academic Difference	Students	Provides school-based academic tutoring by trained volunteers
Clothing Closet	Low-income families	Provides clothing, books, household items, and toys donated by community members
Homeless Youth Advocacy	Families with children who are homeless or at risk of becoming homeless	Provides housing assistance, transportation, and other support services
Options for Kids	High-risk youths	Recreational activities designed to increase social skills and self-esteem
CabiNetwork	Youths and adults interested in doing volunteer work	Training and placement in one of many different volunteer programs
Youth Gang Prevention and Intervention Services	Youths at risk of joining gangs and their families	Case management for youths and their families Advocacy Coordinates Low-Rider Bike Shop Neighborhood social activities
Low-Rider Bike Shop	Potential gang members	Instruction in how to fix and restore bicycles Related business and social events

Center) near the Reno-Sparks line, the Children's Cabinet coordinates and provides a number of programs and services for at-risk youth and families. All services are family-oriented, with an emphasis on prevention, early intervention, and treatment. One of the Children's Cabinet's primary functions is to provide information and referral to youths and families. **Centralized Assistance and Referral** is a crisis intervention and assessment program which provides counseling, referral, and service coordination for youths and their families. The hallmark of this program is the **Truancy Center**, a collaborative effort in which law enforcement and school attendance officers deliver truants to Centralized Assistance and Referral (CAR). On site staff from the county school district and Juvenile Probation provide comprehensive assessment and services for the truants and their families. The **Child Care Resource Council** (CCRC), an independent agency supported by the Cabinet and located on-site, provides families with referrals to child care providers and administers federal child care vouchers, in addition to many related services. The **Family Preservation Program** offers intensive in-home counseling and assistance to families where children are at risk of out-of-home placement. In addition, the Children's Cabinet houses the **Children's Resource Bureau**, a state-operated diagnostic assessment team for families with many different problems. Other programs coordinated or housed by the Children's Cabinet are described in the table of programs and services.

CRITICAL FEATURES

The Children's Cabinet model combines aspects of other collaborative efforts, forming a model that works in partnership with other public and private agencies to provide an array of programs and services. Several aspects of this multi-tiered strategy stand out. These include: co-location of programs, capacity-building for fledgling programs and agencies, and development of strong linkages with schools.

Co-Location of Programs

The Children's Cabinet operates on the principle that families are best served when they can utilize a number of different services in the same location—"one-stop shopping." Most Children's Cabinet programs are located at its headquarters, the Maud W. "Jill" Walker Family Resource Center. When clients come to the Family Resources Center for any one program or service, they can find out about other services available to them or may be referred to other programs in the same building. For example, when Sam, a 10 year-old boy, was brought to the Children's Cabinet by the Reno police for truancy, CAR staff learned that he and his family lived in overcrowded conditions. They then introduced Sam and his family to the Homeless Youth Advocate, who was able to get them into Reno Public Housing. They also found that Sam's 12 year-old brother was having difficulty in school and put him in touch with the Reach for the Academic Difference (RAD) tutoring program. His mother got clothing for the family from the Clothes Closet.

When programs and agencies are co-located, staff can find out about other programs that might benefit their clients and refer them directly to other staff they know. The Children's Cabinet holds monthly staff meetings specifically to enable staff in the building to exchange information and provide updates on their respective programs and agencies. Co-location also facilitates staff training and

development; for example, state employees of the Children's Resource Bureau have provided in-service training to CCRC staff, RAD tutors, and the staff of the new McGee shelter for status offenders. While such arrangements could be made between separate agencies, the fact that they are co-located has allowed the process to be less formal, easier to plan and implement, and therefore more likely to occur and continue.

Increasing the Capacity of Other Agencies and Programs

The Children's Cabinet is designed to help public and private agencies respond to the community's service needs and only develops and operates programs where there are service gaps. As part of this strategy, the Children's Cabinet helps to increase the capacity of other agencies and programs in several ways, including fostering "delegate agencies," providing support to community programs, working collaboratively with other agencies, and developing programs which can eventually be "spun off" to other agencies.

In fostering a "delegate agency," the Cabinet uses its economic and administrative resources to help a new agency sustain itself during its critical development stage. To date, the Cabinet has assisted only one agency–the Child Care Resource Council–in this manner, providing it with free office space, bookkeeping and administrative support, and waiving overhead expenses in order that the new agency could develop its programmatic capacity. As a result, CCRC was able to apply for and receive a federal grant to be a voucher management agency, which will enable it to expand its own administrative capacity. A board of directors has been formed and the process of incorporation is underway.

The Children's Cabinet also helps develop community agencies and programs in other, less formal ways. To bolster programs geared to serving the needs of specific local communities, the Cabinet has established two "satellite offices," one in northeastern Reno and one in Incline Village, a suburb near Lake Tahoe. Collaborating with existing local agencies, the Children's Cabinet provides needed resources to existing programs, complementing and augmenting their efforts. In the Cabinet's first satellite office, the Community Neighborhood Outreach and Prevention (CNOP) program in northeastern Reno, a collaboration has developed with local organizations serving the largely Hispanic and African-American community to assist in the development and sustenance of community programs, many of which have had their budgets cut in the last year. These include "Ambassador Productions," which hosts a weekly dance or activity for young people in the community, a mentoring program for young African-American men, and the gang prevention program (the Low-Rider Bike Shop) coordinated by the Children's Cabinet.

CNOP provides free classroom space to Washoe High School for its alternative high school program and office space and half the salary for the coordinator of the mentoring program. CNOP staff recently facilitated a productive meeting between school department officials, community representatives, parents, and the police department to address concerns about dangerous traffic patterns in the neighborhood. By presenting themselves as willing to collaborate, and by taking a supporting rather than direct service role, the satellite offices have gained credibility within their respective communities. While geographically separate from the Children's Cabinet's administrative office

at the Walker Family Center, the satellite offices share the overall mission of the Cabinet and are supervised by the agency's director.

Strong Linkages with the Schools

Although most of its programs operate outside of Reno's schools, the Children's Cabinet has established strong linkages with the school district which promote effective collaborative services for students. For example, CAR's truancy program has a direct computer link with the Washoe County School District. When police or school attendance officers bring truants into the Children's Cabinet, CAR staff can immediately access students' attendance records and provide individualized assessment, crisis intervention, counseling, and referrals for the truants and their families.

This strong relationship with the schools is similarly helpful in the Children's Cabinet's Homeless Youth Advocacy Program, which identifies and provides services to homeless youths and their families. The computer linkage provides the program coordinator access to information on students, whose sporadic attendance and frequent school or address changes often helps to identify homeless students or students at risk of becoming homeless. In addition, after finding that the biggest obstacle for

Joyce Brown's Story

Joyce Brown lives in Reno with her five children; she has three sons, aged 12, 10, and 4, and twin two-year old daughters. In the Spring of 1991 she left her boyfriend Tim, the father of her three youngest children, an alcoholic who was often "mean" to her older sons. Soon after Joyce and the children moved out, Tim met and married another woman. Joyce was devastated by the ending of this relationship; she had moved to Reno at Tim's request, and had no family or friends in the area for support. Around this time, depressed and struggling to care for her family, Joyce was sexually assaulted. Her treatment consisted of seeing a psychiatrist for a short time, who prescribed anti-depressant medication. The drugs made her moods swing wildly. She started losing her temper with her kids, yelling at them loudly enough for her neighbors to hear.

In July of 1991, a report was made to Washoe County Child Protective Services (CPS) that Joyce was being verbally abusive to her children. The CPS worker referred the case to Children's Cabinet's Family Preservation Program. A counseling team visited Joyce and her children at their home, assessed their situation and needs, and provided individual and family counseling for three months.

Joyce spoke very candidly and positively of her experience with the counselors from Family Preservation. She felt that they were very supportive, rather than judging her or threatening to remove her children, as she imagines the social workers from CPS might have done. Joyce found the individual counseling particularly helpful, coming at a time when she was feeling extremely depressed and upset. Her counselors arranged respite child care through the Child Care Resource Council (CCRC) for her younger children for two days per week, so that while her older children were in school, Joyce could get a break. As a single parent with five young children, Joyce found having a little time to herself on a regular basis enormously helpful. She feels that this alone helped bring some sanity to her life.

The counselors also talked to Joyce about parenting issues and gave her books to read. She recently took a class at the Children's Cabinet on single parenting, from which she claims to have learned a lot. She feels that she is a better parent to her children as a result of the program.

(continued on page 10)

homeless students in attending school was lack of transportation, the advocate established a collaborative agreement with the school district to provide transportation for them. Each morning, the advocate directs the bus drivers to where homeless students are waiting to be picked up for school. As a result, the attendance rates of homeless students have improved dramatically.

The Children's Cabinet also works directly with schools and school department staff. The CAR program is staffed in part by a school district employee who provides intake and assessment for truants and their families. This year, the Children's Cabinet has been instrumental in restoring to the schools one of its two school attendance officers, the funding for whom was cut from the district's budget. Because of its close association with the school department, the Cabinet became aware of this cut and was able to broker a cooperative arrangement whereby the Reno Housing Authority uses a portion of its grant money to cover the attendance officer's salary.

(continued from page 9)

Joyce had been supporting her family solely on her monthly ADC (Aid to Dependent Children–Nevada's version of AFDC) checks and food stamps. She was removed from the roles when she started receiving child support payments from her ex-husband, but then encountered major financial problems when his checks stopped coming. Through the Family Preservation program, the Children's Cabinet helped Joyce with her phone and power bills during this period, and helped her negotiate with the welfare office to reinstate her ADC.

The Family Preservation counselors arranged for Joyce's family to be a recipient of one of the Thanksgiving meals that the Cabinet solicits annually from area businesses and families for their needy clients. Joyce spoke of how surprised and grateful she was the day her Family Preservation counselors arrived with a Thanksgiving meal for her family. Similarly, the Children's Cabinet arranged for Joyce's family to be on the Salvation Army's list of families "adopted" by other families and businesses at Christmas time to receive gifts and money to enable the recipient families to celebrate the holiday.

Patty spoke to her counselors about her oldest son, who was having problems at school. They helped him get enrolled in the RAD tutoring program of Children's Cabinet. He has gone from getting D-minuses to Bs and Cs, and Joyce claims he is much happier in school as a result. He is now planning to get involved in the Youth Offering Service program, a Children's Cabinet program in which youths ages 12 through 17 do volunteer work in the community.

When Joyce was ordered to do three months of community service in lieu of paying a legal fine, she arranged to do it at CCRC, where she had become friendly with staff through her child care arrangements. She did well and learned a lot through this work experience, and has just been offered a part-time position working at CCRC. Joyce is overjoyed about her job; she feels that it will provide her the opportunity to prove herself in the work world. She hopes to eventually get off ADC and support her children by herself. Joyce feels that the Children's Cabinet programs and staff have helped her move from feeling stuck and depressed, and at risk of losing her children, to a point where she is feeling optimistic about the future.

KEYS TO SUCCESS

The Children's Cabinet has been remarkably successful thus far in meeting its objectives. It has brought to Washoe County a network of programs that comprehensively address the needs of children and families, and has bolstered and enhanced the existing public and private programs in the area. It has brought children's issues to the forefront

of the state's policy agenda, ensuring that children's and family's programs will get funding priority. And it has brought the public and private sectors to work together creatively to address the needs of families. A number of factors contribute to the success of the Children's Cabinet, including the strong leadership of the Board and staff, its ability to maintain a high profile, its unique financial stability, and the impact it is making toward creating true systems change.

Leadership

The Children's Cabinet is directed by a Board of Trustees with the vision to plan innovative and effective collaborative projects, as well as the clout and influence to get public agency funding and cooperation. The Board includes some of the most highly-regarded and influential members of the community: high-level state and local public agency representatives, prominent business leaders, and civic leaders. Since the Board members include executive-level representatives of all the relevant public agencies, the Board has the unusual ability to make creative and expeditious planning decisions, capturing the enthusiasm and momentum at meetings, and moving quickly from the idea stage to implementation. Furthermore, since the local human service sector is well represented, there is little danger that the Board will inadvertently develop duplicative programs.

The Children's Cabinet's success can also be attributed to its dynamic and effective executive director, who is well-liked by her many colleagues and with a reputation for getting things done. Sheila Leslie is very good at bringing people together and generating excitement and support for a project. According to Cabinet Board member Rob Calderone, Director of Juvenile Services, once Sheila commits herself to a project, there is no stopping her. In fact, many tend to talk in terms of what Sheila, rather than the Children's Cabinet, has done. There is some consensus that without Sheila the agency could have never gotten to where it is now.

High Profile of the Children's Cabinet

The Children's Cabinet and its programs are well-known in Washoe County and the state. Frequent articles in the local papers, for example, describe the Cabinet and its involvement in community events. The Children's Cabinet's policy arm, the Children's Cabinet Institute, writes and distributes reports and white papers, holds state-wide conferences, and has a voice in Nevada's legislature on issues affecting children and families.

Because there are few non-public human service organizations in the area, many in the community perceive the Children's Cabinet as "the only game in town." Public officials or private citizens who want to see a program developed to address their concerns, often appeal to the Children's Cabinet for leadership. Those making the request are aware of potential funding or may suggest a program that their agency is unable to implement but can support financially. Thus, the Children's Cabinet can short-circuit the process of developing financial or political support and continue to initiate innovative projects.

Funding and Financial Independence

A critical factor in the Children's Cabinet's success is its financial stability and ability to obtain and leverage funding for projects. Soon after its incorporation in 1985, the program received a sizable

endowment from the estate left by Maud Walker, a member of the Reno community. In 1986, the Children's Cabinet Foundation was established with the endowment, which provides the Cabinet with about $100,000 per year in interest, that is spent on operating expenses and administrative salaries. The endowment also paid for construction of the Children's Cabinet's building, the Walker Family Resource Center, which it owns outright. This allows the Children's Cabinet to provide free or low-cost space and services to the agencies on site.

Because of the endowment, the Children's Cabinet can focus its fund-raising efforts on developing programs and providing services. It provides the Children's Cabinet a competitive advantage in applying for grants, because it does not have to incorporate administrative and overhead costs into proposal budgets. It also provides a level of financial security few nonprofit organizations have, enabling it to undertake pilot projects and collaborate creatively with other agencies.

In addition to its unique funding base, the Children's Cabinet has been very successful at getting grants and leveraging other public and private monies. It has taken advantage of its high profile and strong reputation to seek public and private funding for its projects. Moreover, the Children's Cabinet's nonprofit status allows it to seek private donations, apply for certain kinds of grants, and leverage public grants unavailable to public agencies.

The Cabinet's Role in Creating Systemic Change

The Children's Cabinet is a private-nonprofit human service organization in a community where there are few private service agencies. In fact, most human services in Washoe County are provided by public agencies. The Children's Cabinet has strong connections to the public agencies through its highly-regarded Board and successful collaborative projects. Positioned at the hub of the service sector, the Children's Cabinet is viewed by public agencies as an attractive collaborating partner; it is able to leverage public and private funding, is viewed favorably as an agency that creates innovative and effective programs, and is seen by local agencies as being able to get things done. It is, as Board member Rob Calderone describes it, "the public sector's nonprofit." When initially planning Juvenile Probation's new McGee shelter, he sought the involvement of the Children's Cabinet because, as a private nonprofit, the Cabinet would have been able to apply for state funding for which Probation was not eligible. In addition, the Children's Cabinet successfully solicited private contributions and funding for the McGee shelter, something Juvenile Probation, as a public agency, would have been hard pressed to accomplish.

It appears that the Children's Cabinet's approach–developing proactive, preventive programs that focus on the whole family–is being adopted to some extent by other agencies in Washoe County. Almost all of the public agencies with which the Children's Cabinet collaborates have undergone some restructuring in their organization and mission since working with the Children's Cabinet. For instance, through its local collaboration in Reno with the Children's Cabinet, the State Department of Human Resources in 1989 reorganized the way it delivers services on the local level. There is a newly-created Division of Child and Family Services, which provides multidisciplinary assessment and services

for every child that enters the system. The Children's Resource Bureau, on site at the Children's Cabinet, is part of this division. According to its director, the result of the restructuring is that the division has much more authority, both real and perceived, to work creatively with other agencies and better serve its clients.

The Juvenile Probation Department has been very involved in and committed to the Children's Cabinet's approach of family-oriented comprehensive services. The department has increasingly moved toward a more proactive, service-oriented approach to dealing with young offenders. This year Juvenile Probation is opening a shelter for runaway and truant youths that will provide a range of on-site services as well as easy access to all of the Children's Cabinet programs in the adjacent building. Moreover, Probation is collaborating with the Children's Cabinet and other agencies to establish the first adolescent health center in the area, which will be located at the shelter. As a reflection of this movement from traditional probation treatment to a more front-end, family-oriented approach, the agency has just renamed itself the Department of Juvenile Services. One of its stated goals is to expand its prevention and early intervention services, elevating them to the same level of importance as probation services.

The Reno Police Department also appears to have become more service-oriented through its collaboration with the Children's Cabinet. While the initial impetus for community-oriented, problem-solving policing has come mostly from the top through the CAR program, rank and file police officers have had first hand experience seeing the impact of this approach. In addition to much higher school attendance rates, the CAR program is credited with bringing about a 65 percent decrease in juvenile daytime burglaries in 1990. According to Children's Cabinet staff, police officers have become much more cooperative with the program and more committed to the idea of community policing because of this success. In fact, the Cabinet has been approached by the Reno Police Department to collaborate with it in establishing other programs, including tutoring and parenting classes in a working class community recently annexed by the city of Reno.

CHALLENGES

The Children's Cabinet faces several challenges which will affect its ability to achieve its goal of successfully addressing existing gaps in children's and family's services. The most important issue is whether its strategy to increase the capacity of other agencies and programs rather than providing direct services will be effective in the long run. Related issues include the necessity of improving the Children's Cabinet's relationships with other nonprofit organizations, and the importance of diversifying the Children's Cabinet Board.

Viability of the Capacity-Building Strategy

The central question to be resolved is whether the Cabinet should devote itself to increasing the capacity of other agencies and programs, or if it should continue to expand into providing more direct services. While the Board explicitly endorses the former approach, the Cabinet is gradually getting more involved in operating direct services. As it does so, agency staff and resources are becoming more tied up in program operations, to the detriment of new capacity-building activities.

It is not clear that the strategy of developing pilot programs and spinning them off to other agencies will work. One problem is that the Children's Cabinet has not found agencies eager to pick up the operation of its successful pilot programs. The Cabinet must decide what to do if no agency agrees to adopt the program when the time comes. Dropping a successful and needed program in the absence of an agency willing to operate it would be very detrimental to clients and could damage the Children's Cabinet's reputation. However, this might be the only way the Cabinet could free itself from being trapped into a direct service role, thereby investing its resources in raising operating funds and program management rather than in developing new programs. Most board members feel that if the Children's Cabinet continues to devote its resources to providing direct services, it will be less effective in maintaining a broader perspective, expanding the resource base and facilitating the cooperative efforts of agencies to provide services for children and families.

Similarly, the strategy of fostering "delegate agencies" might not be effective in the long run. For one thing, there has not been a great deal of interest expressed by agencies desiring to be supported in this way. And while the process of supporting its first delegate agency–the Child Care Resource Council–has generally been successful, it has not been without its conflicts. One of the main problems for the CCRC involved trying to establish its autonomy while under the leadership of another agency. For example, CCRC had difficulty developing and operating its own personnel policy and practices when its staff were under the roof of the Children's Cabinet, where policies were more liberal and salaries were higher. Moreover, as it is becoming harder for single-issue nonprofit organizations to sustain themselves, it is questionable whether helping such agencies develop and incorporate will be a viable long-term strategy for developing a community's human service capacity.

Relationships with Other Nonprofit Organizations

A related concern is that in continuing to develop and operate new programs and expand as it has, the Children's Cabinet could edge other private-nonprofit service agencies out of business and alienate the very community-based agencies that it wants to help sustain. Because the Children's Cabinet has the economic and political support to be a favorable candidate for public grants, it is in a position to siphon program funding away from agencies that could operate the programs as well or better. According to Sheila Leslie, there have even been times when, although the Children's Cabinet has been one of several candidates for public grants in an open bidding process, they have been given virtual guarantees of winning the contract. This favoritism can only hurt the Children's Cabinet's relationships with other service providers.

Although the Children's Cabinet has been very successful in working with private businesses and public agencies, it has not done as well at establishing productive relationships with other private-nonprofits. While the most common explanation offered for this is that there are very few nonprofit service organizations in the area, clearly there is more that the Children's Cabinet could be doing to seek the support and collaboration of existing nonprofits in the area. Inroads are being established, particularly now that the CNOP office is working with local agencies in northeast

Reno, but the Children's Cabinet must work harder to bring nonprofit agencies to the table along with the other agencies. It should also make a concerted effort not to alienate such agencies by competing for scarce program funding, but rather to provide the support such agencies might need to successfully secure program grants.

Diversifying the Board

Another issue that the Children's Cabinet has been grappling with unsuccessfully for some time now is how to diversify the Board to reflect the full community that the Cabinet is trying to represent. This is particularly important given the demographic trends in the region; the African-American and Hispanic communities are growing at a much faster rate than the white population. The Board has continually failed to attract members from the Hispanic and African-American communities. Board members are correct in acknowledging that without bringing in individuals who actively represent the nonwhite communities the Children's Cabinet is attempting to serve, they will be unsuccessful at working effectively in those neighborhoods.

REPLICATION

The Children's Cabinet model is a powerful and effective one. By operating both as a community capacity builder and as a major developer and provider of needed services, it has helped to ensure that Washoe County has a comprehensive array of services for children and families. State officials have recognized the contribution of the Children's Cabinet; the Family Academy, a commission within the Governor's office, has recommended that a Children's Cabinet be established in all seventeen of Nevada's counties. However, replication might not be feasible. It is likely that in order to replicate the model, it would be necessary to duplicate most if not all of the factors that have contributed to its success: the commitment of a powerful group of individuals representing the economic and political power of the community, a charismatic and effective executive, a community where few service agencies exist, and a large, steady source of overhead and administrative funding. While the success of the effort also depends on the willingness of the public agencies to cooperate, there is no indication that the public agencies in Washoe County were particularly receptive to the concept of the Children's Cabinet. Rather, it appears that they responded to the enthusiasm and dynamism of the Children's Cabinet's ambitious and effective activities.

The Children's Cabinet model is currently being replicated in Las Vegas, where, with technical assistance from the Reno office, a Board has been formed and has hired an executive director. Some Children's Cabinet Board members are concerned that they could run into problems in Las Vegas, where unlike Reno, there is an established community of private-nonprofit agencies that are likely to perceive the Children's Cabinet as an imported franchise, and a threat to their funding base. It is essential for any replication effort that the collaborative that develops be just that; a project that develops within the community, responsive to its particular population, needs, and existing structures, rather than a prefabricated entity that is superimposed on a community.

PARTICIPATING PARTNERS OF EIESS PROVO, UT

OVERVIEW

Although primarily a rural state, Utah shares many of the same economic and educational problems found in more urban areas across the nation. Provo, Utah, a relatively large community of 100,000, is no exception. Unemployment is increasing and salaries are low compared to the cost of living. In four of Provo's elementary schools, 50 percent of the population is identified as "low income" and almost 35 percent of children in grades K-6 receive free or reduced lunch. Teachers' salaries rank 48th lowest in the country, while 20 percent of families are illiterate. In five of Provo's elementary schools, 16 percent of students are in Special Education and 35 percent receive Chapter 1 services.

Children are a natural focus for intervention in Provo. Over 60 percent of Provo's population is under the age of 21 and child abuse and neglect are reaching all-time highs. Many children live in poor, single-parent homes or in homes where both parents work, but can't afford child care; thus, the incidence of latch-key kids is also on the rise. Truancy is also more of a problem in the community these days.

Early Intervention for Ensuring Student Success (EIESS) is a state-funded program designed to address the needs of K-3 students and their families through the development of an integrated system of school-based services. The program has been implemented in 36 elementary schools and serves over 1,000 students and their families. Following legislation (HB234) passed in 1989, representatives from the departments of Health, Human Services, and Education formed a state council that administers the program. The council allocates funding from the three state agencies for schools to help link up at-risk families with needed services. EIESS schools design their own programs based on site-specific needs, but follow the basic structure for the intervention as dictated by the legislature. As a result of this legislation, participating schools are now the focal point for a variety of community services.

In order to understand how EIESS functions, we will focus on one of the most successful sites, Participating Partners, located in Provo, Utah. Participating Partners offers broad support for parents with children in grades K-3. A community council composed of 45 agency representatives manages this effort by meeting monthly to coordinate the activities of the participating schools and community agencies.

CRITICAL FEATURES

The critical features of the program are 1) comprehensive services, such as extensive parent training and support, for the neediest families within the five participating schools (see Exhibit 3); 2) case management through the organization of case study teams; and 3) cross-training within the Department of Family Services (DFS) to serve Participating Partner families. Participating Partners provides intensive services to 85 families, some services of which are open to all families in the community.

The program provides all five participating schools with some basic resources. All schools receive $2,000 for supplies, a monthly calendar of events, a newsletter, and teacher in-service. Each school has some autonomy as well, including the authority to make decisions about which families to involve in the program and which services to recommend for each family. A description follows which outlines the variety of services that Participating Partners provides, both specifically to families in this program and to the community as a whole.

Programs and Services

Through the Parent Education Resource Center, operated by the Department of Human Services (DHS), some Participating Partner parents take part in weekly **parenting classes** at a local school. About 10 of the 50 families attending these classes have a child in grades K-3. The 10-15 different parenting classes meet concurrently, addressing issues such as self-esteem, anger, abuse, hygiene, nutrition, finances, homemaking, and what to do in an emergency. During this two-hour session, an educational child care program is available for the children of these families which addresses some of the same concepts being discussed in the parent session.

To supplement the parenting class, community members and psychology interns from the nearby university are trained as Family Advocates who make weekly **home visits** to participating families. Interns aid parents in developing the skills covered in the regular parent classes and provide them with information about community resources. Each intern carries a caseload of no more than ten families.

The public health nurse/caseworker provides children of families involved in the program with a **complete physical**. Program coordinators hope eventually to expand this service to all K-3 children, rather than just the children of families involved in Participating Partners.

A school psychologist or principal chooses a **mentor family** for each family in the program. Mentor families have fairly free rein to assist the program families in any way they see fit. For

PROGRAMS AND SERVICES

NAME OF PROGRAM/SERVICE	CLIENTS	SERVICES PROVIDED
Parenting classes	Parents	Instruction in parenting issues Educational child care program
Home visits	Families	Advocacy for parents around parenting issues Information about community resources
Physical exams	Children of families involved in Participating Partners	Complete physical exam
Mentor families	Families involved in Participating Partners	Assistance to families including emotional support, transportation, baby-sitting, etc.
Tutoring	Children K-3 enrolled in Participating Partners	Tutoring in reading and math
Family literacy classes	Families	Assistance to parents to help them facilitate their children's learning and development
Family resource van	Families	Mobile library provides educational books, games, and videos to parents and children

example, they may provide baby-sitting on occasion, bring over holiday gifts for the family, give emotional support in times of crisis, or perhaps provide families with transportation when necessary.

Each K-3 child in the program is provided **tutoring** for any subjects in which they need help. Teachers fill out an academic assessment form on each child in the program and meet with the student's designated tutor to develop a case plan. Four of the five participating schools have developed a peer tutoring program in which teachers nominate fifth and sixth grade students to become tutors for the younger children for one hour a week.

Case Management

Several layers of meetings provide forums for discussing family needs and finding ways to meet those needs: 1) Designated school staff meet weekly to discuss the current status of each of their families; 2) the staff who circulate among the five schools, such as the DFS case worker, the nurse and the school psychologist, participate in weekly case study team meetings at each of the five schools to discuss a few of these families at each meeting; and 3) the expanded case team, involving a larger network of agency representatives than those attending the weekly case team meetings, meets monthly to make decisions about new families and next steps for currently enrolled families. In addition, an interagency council meets monthly to facilitate policy and program development.

One of the most important aspects of this program is the development of the case study teams. The school psychologist and agency representatives are all provided in-kind by their home agencies to carry out their new roles as case managers. K-3 teachers within each school complete an at-risk screening instrument at the beginning of the school year, from which the case team selects at least 15 families per school for the program, choosing those families who are most at risk and have multiple concerns. The school requires all elementary teachers to make a home visit to each of their student's families within the first few weeks of school, which facilitates this identification process.

The principal of each school runs the case team meeting, providing an opportunity for members of the team to update one another on the progress of three or four of the most pressing cases each week. Team members talk about the major family problems and the best ways to meet the family's needs, updating one another on the ways in which each worker is currently trying to help the family. The case team carries over cases from the previous year as part of the 15, until they decide that the family situation has been sufficiently addressed.

No one person takes total responsibility for an individual family; participants of the school case team share this responsibility and keep one another updated. For example, the nurse tends to make the initial family contacts, provides physical exams, and collects demographic data on each family. The DFS caseworker coordinates several DFS resources for families who need them. The school principal has responsibility for selecting a mentor family for each case. The school psychologist supervises student entry into tutoring programs and the DHS supervisor arranges for parents to attend parenting classes. To streamline the process, Participating Partners recently adopted a case plan summary form so that case team members can rely less on their collective memory for the specifics of a family's service plan.

Perhaps one of the most important aspects of this case management model is the underlying philosophy about helping families that has evolved among those providing direct services. Caseworkers believe their primary responsibility is to develop a good rapport with the family in order to better facilitate each family's progress through a case plan. As one team member indicated, sometimes it is only because of the strong rapport that develops between the worker and the family that the possibility of helping a family is created. Program staff do not push the program on potential family participants, although they will periodically contact candidates who initially declined services to see if their needs have changed. One caseworker estimates that about half of the participating families were initially hesitant about becoming involved in the program and had reservations about the motivations of the people contacting them. However, once a relationship was established and families realized the caseworkers were there to help rather than penalize them, they usually accepted their services. Only two or three families declined services during the three years the program has existed.

This approach seems particularly important for a program in which few families are mandated to participate and which places a strong emphasis on class participation and skill development. Intensive, long-term, voluntary participation in a program requires the development of relationships and trust in order to sustain family commitment throughout recurrent family crises. Sustained participation most successfully occurs in a context in which families **choose** to participate in the program and become committed to its goals by developing relationships with others involved in the program.

Debbie Reeder's Story

One of the families helped by the Participating Partners program is the Reeder family. Debbie Reeder is married, with seven children ranging in age from two months to 16 years. Her husband is a professional who had been earning a good income until he was hospitalized for depression last year and subsequently lost his job. The entire family moved to Provo a year ago. Because they had used up all of their savings, they became homeless, living in a tent in a friend's backyard for three months during the summer. Debbie was pregnant with her seventh child at the time and was providing for the rest of the family to the best of her ability.

Once school started, the family was identified by the case study team because one of Debbie's sons was having difficulty in school. The Participating Partners nurse and social worker came to visit Debbie at her friend's home to ask if there was anything they could do to help. Debbie said she didn't feel at all intimidated by this home visit. The workers were genuinely friendly and only seemed to want to offer assistance. In fact, she preferred to have them visit rather than call, so that she could gauge their reactions as she talked about her situation.

(continued on page 21)

Signs of success are appearing. After the first year, EIESS reported several positive outcomes statewide. The most successful school projects show an increase in reading and math achievement and fewer referrals to special education classes. Teachers report more contact with parents and a decrease in socially inappropriate behavior among their students.

Cross-Training

The directors of Participating Partners, with the support of Amanda Singer, the state coordinator of EIESS, promoted the idea of cross-training within the local Department of Family Services as part of the program initiative three years ago. The impetus for this restructuring was, in part, the acknowledgement that many families have been involved with more than one DFS program, and often for a long period of time. Of Participating Partners' 85 families, 35 have received either medicaid, food stamps, or financial assistance for at least three to four years. By cross-training workers across these three programs, they hoped to reduce the duplication of effort and paperwork necessary when determining eligibility for more than one of these services, and reduce the frustration and inconvenience involved for the family who must negotiate their way through the different programs in order to obtain and maintain services.

One caseworker now works solely and intensively with Participating Partner families. She contacts each family at least once every two to six months, depending on their level of need. This arrangement fosters the development of a working relationship between the family and the caseworker; the caseworker gains a better understanding of the family situation and the family can begin to develop a sense of trust with the caseworker.

Cross-training proved to be a very complex and time-consuming task. Although the DFS caseworker's caseload was reduced from 200 clients to 45, gaining a thorough understanding of all three departments' policies took up a great deal of her time and energy. Program procedures and eligibility requirements are complex and highly

(continued from page 20)

After this visit, Debbie agreed to become involved with the program. Because Participating Partners has a priority agreement with the housing department, they were able to place her in subsidized housing within a few weeks. Through Family Services, they enrolled her children in the medicaid program and set her up to receive food stamps. They involved her children in a tutoring program at the school, arranged for a complete evaluation through the health department for her son, and enrolled Debbie in the DHS parenting program, family literacy classes, and an assertiveness training class. Since the family no longer carried insurance, Debbie had not been seeing a doctor throughout her pregnancy, but Participating Partners was able to arrange prenatal care for her through a program in the community. They found a crib for her baby, and at Christmas brought over a ham for the holiday dinner. This summer, Participating Partners enrolled her children in a new summer program and waived the enrollment fees. The program is funded through Latch-Key funds and is open to all elementary school students for two months every week day, serving breakfast and lunch. Even her sixth grader, who was not technically eligible for the program, was offered a "helper" position so that she could participate.

Her seven year old has been helped by the tutoring program; at seven, he is currently reading at the fourth grade level. Her husband has been able to find a part-time job teaching at a community college in town, which reduces some of the financial burden for the family.

Debbie is very grateful for the help she was given and hopes to become a volunteer herself in the future to help other families with similar problems. She feels that only someone who has lived through a similar experience can possibly understand the devastation that can occur to a family during a crisis.

differentiated from one another. To understand the intricacies of more than one program requires continual support and communication among the lineworkers within the department. The end result however, is that families can now negotiate their way through the various departments by talking directly with only one person, thereby effectively increasing family access to services and reducing agency duplication of data collection.

With a reduced caseload, the Participating Partner coordinators expected that the cross-trained worker would then have time to do more home visits with families. However, this required a change in mindset that was slow to emerge. The DFS worker initially resisted doing home visits because it was a way of case management that was new to her. Her previous role within DFS had not required this level of outreach to families–she simply met families in her office and filled out the appropriate paperwork for them to receive services, based on answers to particular questions regarding their situation. Home visits were much more time-consuming and emotionally draining, with the potential for overwhelming the caseworker with the complexity of a family's problems. Gradually, however, with encouragement from the program coordinators, the DFS worker has begun to incorporate more home visits into her other duties.

This new way of working facilitates a greater rapport between families and the DFS caseworker. Cross-training and a reduced caseload allow for the development of more personal relationships between the DFS worker and families, as indicated by the fact that the caseworker now takes the time to write personal notes on formal mailings to each of her families. Because of this intensified relationship, she finds it easier to confront families when necessary, as well as to provide support. For example, when a family is no longer eligible for a service, she can now present this to them and work out alternatives without creating hostility. The caseworker believes that families are happier, they attend training sessions more regularly, and there appears to be less fraud than in the past. In fact, many families now call her on a regular basis, thereby reducing the number of families that she needs to track down each month to update records.

The DFS caseworker also provides families with resource information and referrals beyond the domain of the Department of Family Services as a result of her participation in monthly case review meetings through Participating Partners. Not only does she keep abreast of the status of each of the families from other agency representatives, but this vehicle for communication increases her network of resources and her awareness of what other agencies can do for families in the community. Rather than just supply families with brief descriptions of other agencies, she can review their programs for families in detail, now that she understands more about the services other agencies offer.

Strategies for Improving Service Delivery

All collaborations encounter difficulties and barriers in the process of implementing change in their communities and Participating Partners is no exception. One of the reasons for its success however, is that participants of the program not only identify barriers rather than ignore them, but they are able to find creative ways of working through difficulties as they continually

renew their vision of how services should be provided in their community.

One example of this process is illustrated by changes made in the organization of the Department of Family Services parenting program, a program which involves some Participating Partner families. The original vision of the parenting program was a two-step model in which a group of parents first attain a certain level of parenting skills, and then move on to an advanced curriculum. However, over time the director of the parenting program realized that maintaining the continuity of both the curriculum and its participants provides a critical foundation for families learning new parenting skills. The relationships that families develop with one another in the classes becomes more important for facilitating change than the actual skills taught in the class. As a result of this discovery, the two levels have been merged into one class again. This provides less-skilled families with potential role models and avoids disrupting networks among families that have been created over time.

A second barrier to change centered around providing access to services. When the family resource van was first introduced into the community, it was stationed at each of the five elementary schools one day each week. Staff soon noticed however that the Participating Partner families, families they were most hoping to reach, were not using it as a resource. To address this initially poor response, Participating Partners stationed the resource van outside the school after the weekly family literacy class as well, so that the parents attending this class could regularly obtain new educational materials for their children without having to make a special effort to do so. This strategy works well for these families and the van is a real success in the community. One barrier to improving access still remains, however. Because the van is funded by Chapter 1, it is designated to serve only families of Chapter 1-eligible children. The program coordinators would like to see the van stationed at other areas in the community, not just at Chapter 1-funded schools, but so far, a solution has not been found.

Another way in which the program will try to increase access to services for these families is to provide them with the option of a home-based family literacy program. Program workers have found that although many parents want to participate in the training that the program provides, they feel threatened by the school setting in which the classes are taught. Many parents agree to attend the class, but either do not attend regularly or never show up in the first place. This year, the program will be offered to families in their homes, as a way to increase participation.

One of the goals of the program is eventually to provide physical exams for all K-3 children, in addition to the Participating Partner students currently served. Although involved in this effort from the beginning, the Department of Public Health has been a reluctant participant, concerned that the collaboration might be temporary and therefore not capable of sustaining real change in the community. However, the department's nurse coordinator now regularly attends the monthly council meetings and connections are developing. To further their effort in reaching their goal, Participating Partner coordinators regularly communicate with a new clinic in town which will be providing health

services to families in the community on a sliding fee scale. Their hope is that by strengthening this connection through referrals and consistent communication, the clinic will also become involved in their effort to provide physicals to all K-3 students.

Finally, the program coordinators recognize that the mentor family program needs a renewed focus in order to be successful. With changes in school staff and increased demands on the organizer's time, what once required only an informal interchange between staff and mentor families, may now require more structure. The program coordinators hope this year to create more specific guidelines for mentor families that will not only reduce confusion about the scope of their role but also provide families with new ideas about the range of services that they can provide.

Keys to Success

Participating Partners has proven to be successful in a variety of ways. They have developed a mechanism by which at-risk families can be easily identified through the school system. They have coordinated many different programs to provide comprehensive service delivery to those families most in need. They have developed new programs for families as they recognized a need in the community and they have improved access to those services. Finally, they have improved communication in their community by facilitating discussion among agencies and by facilitating the development of support networks for families.

When speculating about the most important aspect of Participating Partners, staff contributed many different ideas about what made this collaborative successful in their community. Some attributed their success to the regularity of meetings to facilitate communication and the direct contact with other agency representatives. One said it was the dedication of the particular people running the program, another said it was the dedication of the people running the case team meetings, while still another said it was the decision to provide services off the agency site.

While all of these factors may be critical to this program's success, another aspect that stands out as important is the way in which the collaborative process is handled. The development of a successful collaboration takes a great deal of skill and care on the part of its participants.

For example, one way in which turf barriers have been broken down among agencies is that the Participating Partner coordinators keep the focus of discussions on the needs of families instead of on the needs of agencies. When collaborators are able to shift their attention away from the constraints within their individual systems, they begin to think more creatively about how to meet the various needs of families.

The two coordinators admit however, that participation and cooperation still often come down to convincing agency representatives that they will directly benefit from a collaborative effort. For example, they offer free publicity to agencies whenever possible, such as giving credit for their participation in a civic event in the Participating Partners newsletter.

Collaborative fund-raising is another powerful way to promote agency involvement and cooperation. The coordinators take the initiative to approach other agencies to submit grant

proposals with them when appropriate. This helps to create a context of shared resources and responsibilities, and thus, investment in the collaboration.

Although not necessary for a successful collaboration, the two coordinators of Participating Partners are not directly affiliated with any particular public agency. Unhampered by agency agendas or constraints, this "neutrality" may serve to offset potential suspicions of agency engulfment and the turf protection that can result from this. Seeking out agency-neutral leaders may be of some benefit in communities where there has been a long history of turf protection, although it is not at all clear that such a history existed within this particular community prior to Participating Partners.

The coordinators are also heavily involved in other councils and coalitions within the community, which serves to keep them abreast of changing community needs and resources as well as to increase their credibility with other community members and expand their networks. It seems particularly important to have program leaders who have gained the credibility necessary to bring powerful people together, without themselves becoming overly invested in gaining personal power in the process. These factors, and no doubt many others, appear to have facilitated the development of a successful collaboration in this community.

THE MURPHY FAMILY CENTER - MURPHY SCHOOL DISTRICT PHOENIX, AZ

OVERVIEW

Located in the economically disadvantaged south-central section of Phoenix, the four-school, K-8 Murphy Elementary School District is one of the city's neediest. Ninety-five percent of its 2,323 children are living below the poverty level and thus eligible for the federal free lunch program. The student population is 86 percent Hispanic and eight percent African-American; 39 percent of the district's students are designated limited-English-proficient (LEP).

Despite these conditions, the district's schools are moving toward success. Attendance rates, for example, are over 94 percent district-wide. But students are still struggling academically. Standardized test scores are all below the 50th percentile on national norms, and data from the high school Murphy students attend show that large numbers of students eventually drop out of school.

To address these needs in a significant way, Superintendent Bob Donofrio says academic programs alone will not be enough. In fact, several years ago, the district began putting in place a variety of instructional programs designed to raise the academic achievement of children, such as all-day kindergartens. In a more typical situation, this might have been sufficient, judges Donofrio, but, in his seventh year as superintendent (and 20th in the district), he now talks of developing schools as the "hub of the community." In the neighborhoods they serve—with high levels of poverty and crime, and with many poorly educated parents—the schools need to go beyond their own grounds and beyond the regular school day to address the needs of children during "the other 91 percent" of time they are not in school. Before children can learn, before they can become good students, the environment of the home needs to be "stabilized," says Donofrio. As a "hub," the school can provide a safe place where children and their parents feel secure and get the assistance they need.

PROGRAMS AND SERVICES

The district currently offers a range of different programs and services that help meet emergency needs of children and families, offer short-term social and

economic assistance, and provide behavioral health counseling and adult education/literacy training (Exhibit 4).

The **Murphy Family Center (MFC)**, a re-located unit of the state's Department of Economic Security (DES), occupies a district-owned building near the Superintendent's office (100 yards from one of the Murphy schools). The most visible collaborative effort of the district–and the most dramatic–the MFC houses 22 eligibility workers and other staff and serves families living in the 85009 zip code, which also encompasses the Murphy Elementary School District enrollment area. The MFC office administers a range of social assistance programs, including Aid to Families with Dependent Children (AFDC), Food Stamps, JOBS program, Two Parent Education Program (TPEP), and AHCCCS (Arizona's version of Medicaid), that makes medical services available for those 18 and under. The MFC also distributes Emergency Assistance funds and operates a food bank and clothing closet.

One of the earliest attempts of the district to reach out to families of the community was to fund two district **community workers**. Supported by Chapter 1 and Migrant Education resources, the two community workers provide a link between the school, MFC, and families that are facing particular economic or social difficulties. They help disadvantaged families, often non-English-speaking and without much education, to navigate the city's system of housing and assistance programs. They also provide a bridge between each school's on-site team, made up of a counselor, a nurse and a home worker. Since the Murphy Family Center opened, the community workers' role has expanded and their importance in the collaborative enterprise has increased.

Behavioral Health Services are provided by Valle del Sol, a community-based organization. As part of a pilot program to show that services can be provided in a more efficient way, Valle del Sol has placed an intake worker and a case manager in a classroom near the MFC building on the district grounds. A counselor circulates through the schools on a weekly basis, providing group and individual counseling to troubled students.

The district has identified and made available a variety of **Adult Education and Literacy** services for the community. English as a Second Language (ESL) and GED training are provided at the MFC; GED training is also offered through Phoenix Union High School District. Friendly House, a local non-profit, provides citizenship training under the amnesty act and Chicanos Por La Casa offers ESL classes.

In addition, several other projects are involved with the district in various ways. These include Project LEARN, a United Way initiative which brokers supplemental services for schools (ESL, health care, counseling, child care) by linking with on-going United Way services (4-H, Salvation Army); Conocimiento, a comprehensive child development project; and a new Drug-Free Schools and Communities project that, with help from United Way, Arizona State University, and the county, provides after-school care for children, peer mediation and self-esteem classes, and a neighborhood watch program.

With this broad range of programs, the district is searching for ways to

PROGRAMS AND SERVICES

NAME OF PROGRAM/SERVICE	CLIENTS	SERVICES PROVIDED
Murphy Family Center	Families and their children	AFDC, food stamps, JOBS, Two Parent Education Program, Medicaid, emergency assistance
Behavorial Health Services (Valle de Sol)	Children and youth	Intake worker and case manager provide counseling, group therapy for troubled students
Adult Education and Literacy (Phoenix Union High School District; Chicanos por La Casa)	Parents	English as a second language, GED training
Project LEARN (Valley of the Sun United Way)	Families and their children	Broker services on an as-needed basis, including ESL, health care, child care, etc.
Conocimiento (Southwest Human Development Center)	Families with children aged 0-5	Parent counseling and support, child development, referral to services, and academic/ career assistance for siblings
Wrap-Around Head Start	Children aged 4-5 from low-income families	Full-day Head Start that includes pre-school training and health and nutrition support

coordinate services through institution-to-institution contacts and information-sharing. Community forums provide workers with an opportunity to share their experiences. In monthly round tables between MFC staff, school counselors, nurses, and the community workers, information-sharing, planning, and procedural issues are addressed. Run by the superintendent, the round tables were held in conjunction with the establishment of the MFC as a way to introduce the DES workers to the school and district teams. When the Murphy Family Center was inaugurated in 1991, DES provided a review of the various programs administered in the office, their eligibility requirements and purposes. As the participants became more familiar with each other, the topics focused more on updating and planning. In the fall of 1992, for example, the topic of the first round table meeting was the anticipated opening of a Child Protective Services unit at one of the school sites, scheduled for early 1993. It is not feasible however, for the round tables to provide a forum for reviewing the needs or progress of individual families.

CRITICAL FEATURES

The School as the "Hub of the Community"

Superintendent Donofrio's vision for Murphy is to increase coordination of services by making schools the "hub of the community." Under this concept, the school should be the focal point of community activities and the one place within the neighborhood where the facilities are the nicest, where equipment is the best, and where parents and their children can truly feel safe.

The development of site-based services, such as the Murphy Family Center, is part of that vision, but in Donofrio's mind, it is much more. While he admits the district still has a long way to go, there <u>are</u> signs of progress toward that end. The district is providing leadership in the effort to "take back the streets" from the gangs and drug-dealers. For example, graffiti is white-washed the same day from school buildings and other locations in the area and periodic marches through the neighborhood have been a public symbol of the community's commitment.

The Murphy Family Center, however, has also become the lighthouse for collaborative efforts. As the most visible initiative attempted thus far, opening the center has shown the community–and the state–the direction the district is going. The center is the brainchild of Donofrio and the former director of DES, Linda Moore Cannon. Frustrated by the inaction of the statewide committee for interagency collaboration, on which they were both serving, Donofrio and Cannon decided to take matters into their own hands. Their agreement: If DES would pay for remodeling, the school district would rent them space on district grounds for $1 a year. The two administrators worked out details within their respective organizations, and in a few short months, an entire DES unit was relocated from Phoenix's Thomas Road office, which was occupied by over 300 employees and carried a total case load of nearly 6,000, to the current space where about 1,700 clients are enrolled. Rather than merely assign staff to the experimental program, DES chose workers based upon their willingness to work outside their traditional role and extend their functions.

Eligibility workers in the center perform the same basic functions they did in their previous location, and their individual case loads are, if anything, larger than before. But their relations with clients and the schools are dramatically different now. In the more

intimate context of the MFC, service is more personalized and frequent. Workers have actually gotten to know clients and recognize them when they come in—they are no longer just numbers. As a result, some of the workers report that clients now come in for help with paperwork and sometimes call them up for advice or to update the worker on their situation. In the previous office, all information was obtained after the fact; here, families let them know of changes in their situation in advance.

A key factor not to be overlooked is the role of the community workers in this process. They provide the links between the families, the schools, and the center. Before the MFC opened, the district's two community workers, Pam and Maria, followed up on referrals from teachers and school teams to assist families with emergency food, clothing, housing, and other needs. They provided transportation when necessary and acted as an intermediary with social service offices, landlords, and other representatives of the system. Longtime residents of the community, the two women had occupied this role for nearly 15 years.

With the MFC in place, they continue to perform these functions, but in a much more critical way. On a formal level, they have been trained to review eligibility for emergency assistance funds and have signed a letter of confidentiality that allows them to obtain relevant information on families at DES offices. When a family needs funds for rent or utilities, Pam and Maria are now qualified to review the case and make a preliminary determination of eligibility for DES Emergency Assistance funds. A portion of the funds allocated to the MFC has been set aside for the community workers, so while DES is technically in charge of distributing the money, the district prioritizes where a portion of it goes. Pam and Maria have also been trained on eligibility requirements and intake procedures. Because they tend to know the families' situations better, they can explain to clients the kinds of programs and services they might be eligible for, help them

Laura's Story

Laura is a first-grader, one of six children in the family that immigrated from Mexico a year and a half ago. The eligibility worker at the Murphy Family Center noticed insect bites on Laura's arms and went to investigate. She was concerned that the living conditions were inadequate. Laura doesn't speak English very well. What the worker found was a rough shed behind an apartment building that was infested with insects; an electrical line hung dangerously close to the structure. In talking with the mother, Maria found that the family had arrived from Mexico without money or a place to stay, and they found this place and asked to stay a few nights in the shed. Over a year later, they were still living there. The mother said they had been looking for a proper apartment, but they still didn't have enough money. The worker returned to the office and placed a call to Pam, one of the district community workers. Since Pam and Maria knew virtually all the landladies, maybe they could shed some light on why the landlady had allowed the conditions to deteriorate so much. Pam called her up, and the landlady, who is eighty, claimed she was unable to make any repairs. Pam immediately called another landlady and asked her to hold a place for the family. The need for rent remained, so the eligibility worker enrolled the parents in the Two Parent Education Program (TPEP) that pays the first six month's rent. While a long-term solution still has not been found, at least the housing conditions are adequate and the parents are enrolled in a job training program that might enable them to find more secure work when the TPEP payments run out.

complete the application, and accompany them to center. They used to have to wait in line with families; now they can ask ahead of time for an appointment or make a call. Thus, instead of taking days, program enrollment or emergency money can be obtained in hours.

On a personal level, immense barriers have been removed between families and the Department of Economic Security. Workers at the center know Pam and Maria and do not hesitate to call on them. Similarly, when there is an emergency, the community workers call the MFC director and she can attend to it immediately. Before the MFC was established, DES workers treated Pam and Maria as just another voice on the phone. They describe how intimidated they felt by the DES and how uncomfortable it was dealing with the giant bureaucracy. Likewise, instead of trying to track down a family for basic information, MFC workers now just give Maria or Pam a call.

The community workers report having gained a much better understanding of the DES workers' jobs as well. Aware of the daily time slots the workers have for interviewing or paperwork, the community worker can schedule their calls or visits to coordinate with the MFC workers. Moreover, having had a chance to see the manuals, training, and paperwork confronting the DES workers, Pam and Maria admit greater appreciation of their task. As such, they now advocate in both directions–both for families and for DES workers. When families become frustrated with delays, Pam and Maria can explain the demands on those workers to them.

These changes are having an impact on families. Their testimonials are emphatic in their praise for the community workers; especially the personal attention and non-judgmental approach that Pam and Maria take. Because both women grew up in the community, are graduates of the school district, and sent their children to Murphy schools, they have credibility with the families they serve. Maria is fluent in Spanish, and Pam, whose knowledge of the language is limited, is affectionately known as La Huera (light-skinned) among the Hispanic families. The women say their purpose is not simply to help the families, but to enable them to help themselves. They do not judge their clients and try to do what is best for the children. While they admit that some of the parents "aren't very nice," Pam and Maria press to provide families with assistance because of the children who, they say, "don't choose their parents." At the MFC, informal surveys of clients have yielded only positive comments, and the virtual absence of complaints from the Client Advocates Office in the governor's office, is a further measure of families' satisfaction and program success.

Development of the Vision

The Murphy collaborative has not developed according to a well-defined plan; instead, it has grown out of a combination of necessity and serendipity. When Donofrio added the all-day Head Start, it was due in part to the availability of funds. The opening of the Murphy Family Center depended to a large degree on Donofrio and Cannon, rather than a grand design.

Consider recent developments of the Conocimiento project. Conocimiento is one of 24 federally-funded Comprehensive Child Development Projects looking at the effect of truly comprehensive assistance for families. With an identified sample of

120 families from one Murphy school, the project is providing a wealth of assistance using "family advocates" who work with a case load of ten families each. The family advocates make home visits and link the families to services, and the project provides several types of parent training (parent training programs are available for all the families in the school). In trying to link families with jobs, or enroll them in job training programs, the family advocates kept running up against the same barrier: a lack of available child care in the community. Because of close relations with the MFC however, a possible solution has begun to emerge.

Conocimiento learned from MFC that the project could apply for a grant to administer licensed, home day care through the office. Eligible families in the community can then provide day care for up to five children in their homes. Those already on AFDC will receive a subsidy. Thus, one group of families is provided the child care they need, and another group receives the training and guidance they need to operate a day care center and pick up a modest income.

Mrs. Lopez's Story

Mrs. Lopez was paralyzed with anxiety over her financial and emotional crisis. Her husband was not working, and their marriage was falling apart; her children were emotionally upset and were not attending school. There was no money for food, and the power company was threatening to cut the utilities off. "I was devastated," she said, "There was no where to go, no one who cared. I couldn't think straight; everything closed down." The community workers heard of her problems and came to help out. Through the Murphy Family Center, they managed to have utilities turned on; they provided them with food; the children returned to school, and her husband got a job. "All I needed," she said, "was to get past that crisis. Now, we're doing fine."

CHALLENGES

Building Family Self-Sufficiency

While Murphy has managed to link up with longer-term interventions to some degree, such as GED classes, job training, and ESL classes, most of what the district programs do is short-term brokering and emergency assistance. They primarily deal with crisis issues involving housing, utilities, welfare applications, and translation. Clearly, crisis management has a positive impact on the families served, but what is the long-term effect? How many of those families are becoming self-sufficient? What proportion is able to sustain the short-term gains they make as a result of interventions from the community workers or other school programs?

On a small scale, the Murphy district is looking at this question through the Conocimiento Project, where a relatively small sample of families is being provided intensive, almost daily, case management. While the project does not answer the question of whether the more diffused intervention available to the whole community promotes lasting difference in families' lives, it may shed light on the potential effect of a more intensive approach. Although it is too soon to tell whether Conocimiento is leading families to real self-sufficiency, the project has encountered barriers inherent in the system that reveal some basic contradictions in the support programs for families trying to become independent: as their income increases, they lose eligibility at a rate than results in a net loss of disposable income. In

other words, it makes good financial sense to stay on welfare. This contradiction has become painfully clear to one of the family advocates, who, since she has been working for the project and attempting to develop self-sufficiency for herself, has had to give up her apartment and move in with her mother to make ends meet. While her own determination to persevere is strong, she is finding it increasingly difficult to be convincing when she counsels disadvantaged families to move off welfare.

Superintendent Donofrio and others in the district recognize that they are not going to reform the welfare system, but acknowledging the weaknesses in the system and looking for ways to confront or work around them is an important task. For example, Murphy might continue to focus services at the crisis level; setting self-sufficiency as a goal may be unrealistic. On the other hand, perhaps the collaborative should seek creative ways to make a transition from welfare look more attractive to clients.

Case Management

Murphy School District has managed to put together an impressive array of student and family services that can alleviate many of the problems associated with poverty and educational disadvantage. However, the potential for the initiative is limited unless a way can be found to improve the coordination among the various services. At present, information is shared informally between the community workers and the Murphy Family Center. When the eligibility workers want to know where a family is living, or how the children are doing in school, they ask the community workers. No one, however, has a firm grasp upon the array of services families and children are receiving at any one time. The issue of case management is one of both service planning and information-sharing. While Friendly House can identify which children they serve, as can the MFC and the district, none of the participating agencies has any idea who the others serve.

The superintendent hopes to build a site-based approach that capitalizes upon the existing school referral team made up of counselors, family workers, and the nurse. The break in the system at present is the teacher, who refers children to them but then is no longer involved. As a first step, the schools will generate lists that show which children are involved in particular school-based programs (ESL, after-school tutoring, etc.). Eventually, Donofrio hopes to see teachers equipped with the knowledge and expertise to recommend programs beyond the obvious crisis interventions. Building upon a referral checklist that teachers use to identify children's needs for food and clothing, he hopes to train teachers so they can begin to recommend next steps.

Whether this approach is realistic or not remains to be seen. A more practical solution might be, for example, to augment the role of the site review team so that they not only make referrals, but assume responsibility for long-term management of the most troubled children/families. They would be required to discuss the most needy cases with the community workers and MFC as well as develop a more systematic process of needs identification, case review, and service recommendation.

PAGE HIGH SCHOOL
STUDENT SERVICES PROGRAM
PAGE, AZ

OVERVIEW

The community of Page is eight miles south of the Utah border, near Lake Powell in Arizona, and adjacent to the Navajo Nation. Although Page is a small town of only 7,000 most of the year, it expands to over 75,000 in the summer, when tourists come to take in the serenity and beauty of the area.

The major employers in town are the schools, county and state agencies, and the new power plant. The power plant has helped raise the standard of living for Navajos in recent years; however, some members of the Caucasian community view the Native Americans as a threat to their employment. Because the reservation cannot sustain the current population, more and more Navajos are moving to Page.

The Navajo community just outside Page is located in one of the most disadvantaged and geographically isolated areas in America. Many on the reservation must rely on kerosene lamps for light and haul in their own water; most homes do not even have telephone service. Students have to travel by bus to school—as far as 80 miles one-way. While Navajo young people are often eager to leave the reservation, they see few opportunities to do so.

Page High School's student population is 67 percent Native American and 33 percent Caucasian. The school grew more than 10 percent in student population this year (from 900 students in 1991-92 to 1,093 students in 1992-93). Although the school's dropout rate is relatively low (from six percent to 13 percent, depending on how the figure is calculated), an estimated 50-60 percent of the 1,000 students are considered to be at risk: 45 percent of the students are receiving free or reduced lunch, 30 percent are LEP, and 50 percent are eligible for Chapter 1 services. About 175 students are intensively served by the student services program, and another 300 receive some form of services.

Youth gangs are becoming a serious concern for the community, as are student alcoholism and teenage pregnancy. Cases of alcohol abuse outnumber drug-related incidents 15 to 1, and the teenage pregnancy rate is 17-20 percent per year.

Because of the geographical isolation of the city of Page, many of the private and/or community services found in larger cities are not available to students in Page. Page High School, by necessity and by default, has become the provider and the center of many social services.

The student services program at Page High School is a multi-service collaborative, originally implemented as part of the high school discipline/truancy program. The program uses counselors, student study teams, and Roundtable discussions among agency and school representatives to address students' needs. Consistent communication and information-sharing are the main strategies for collaboration in Page, Arizona.

Compared to the other collaboratives described in this report, the nature and process of interagency collaboration in the student services program at Page High School is informal and least institutionalized. In fact, it may be best described as interagency "cooperation" rather than "collaboration." It nevertheless represents one rural school's attempt toward interagency collaboration in order to better serve the needs of today's at-risk students.

Below, we describe the critical components of the program and the challenges the program faces ahead; in particular, issues dealing with rural isolation and cultural diversity are discussed. To illustrate some of the needs of the population served by the program, profiles of two students are also included.

Critical Features

In 1988, when Page hired its new principal Larry Wallen, the school had a traditional counselling program that focused on scheduling students into classes and on college advisement. Concerned that this approach was not meeting the students' needs, Roy Stringfellow, the assistant principal, and Wallen soon broadened the counselling office into a student services program and began to form linkages with other agencies in the community. First Juvenile Justice and Probation and then other agencies began to coordinate their services with those of the school. It has since developed into a multi-service collaborative involving middle-managers and line staff from a dozen separate agencies.

Roundtable

The Roundtable is the school's most formal coordinative effort. Child Protective Services (CPS) supports a school liaison to organize these monthly meetings in which issues are dealt with that may otherwise fall through the cracks of the various systems. In these meetings, middle-managers and line staff from many agencies share information about their procedures and policies and update one another on agency activities.

The strong ties the Page program has with the community help make the Roundtable work. As Stringfellow describes it, "Anyone is welcome to the school to work with the kids; the school has become the home base of much else in the community." The school facilitates communication with many local, state and Navajo agencies and organizations, urging attendance at the Roundtable meetings by representatives from the following organizations:

- ❑ Department of Economic Security
- ❑ Child Protective Services
- ❑ Navajo Social Services (NSS)
- ❑ Lake Powell Institute

- ❑ Page Community Guidance Center
- ❑ Page Police Department
- ❑ Coconino County Sheriff's Office
- ❑ Arizona Department of Public Safety (DPS)
- ❑ Coconino Juvenile Probation Department
- ❑ Coconino Superior Court Juvenile Division
- ❑ Alcoholics Anonymous
- ❑ Coconino County Vocational Rehabilitation
- ❑ Navajo Police Department

The Roundtable discussions are particularly helpful in enabling participants to understand each other's responsibilities, and has become the place where many community and tribal agencies gather to present, share, and discuss issues, concerns, and solutions. For example, at one Roundtable meeting, two representatives from the local hospital led a discussion to find solutions to a common problem in the community–a need for space for acute care of mental health patients before they can be transferred to an appropriate facility, since there is no psychiatric care facility in Page. Procedures and doctors' latitude in decision-making were discussed in order to assess the degree to which certain rules could be bent and under what circumstances. Representatives from each agency then shared what their organization could do in this situation. Eventually it was agreed that the hospital representatives should set up guidelines for admittance and that other agencies would help facilitate the process.

The key tasks for the Roundtable in 1992-3 are to: 1) coordinate Page truancy policies and protocols with those of the Navajo reservation so that all students will be treated equitably; 2) conduct a needs assessment on adolescents and families whose cases are not severe enough to call in CPS or JPO (Juvenile Probation Office) and therefore, often fall through the cracks; and 3) write a joint proposal for a grant to fund a crisis-intervention facility that will provide counseling and other services for such cases.

Through these Roundtable meetings, participants have developed a system to share information legally among agencies. For example, they have designed a consent form for the Probation Department so that when a youth becomes involved with this department, the family signs a form that allows Probation to share client information with the Roundtable participants. Professionals from various agencies are now able to share client information in order to develop more effective strategies for dealing with their problems.

The Roundtable has also developed procedures for dealing with specific types of cases, depending on which agency needs to be involved. If it appears that the police need to be involved in a child abuse case, for example, the school staff ask the child's permission to bring in the police first to question the child, rather than school staff. Then the police notify CPS or another agency as necessary.

Partly as a result of the Roundtable effort, the school has come to work more closely with the Page Police Department and the County Sheriff's Office, in dealing with the increasing occurrances of violent crimes in the community. One indication of this intensified relationship is that the school now has two-way radio communication with the local Police Department. Because lines of communication are kept open, rather than simply following legal procedures to the

letter, the police often contact the school or another agency to discuss possible solutions involving particular cases. The school also holds monthly "Enact" meetings involving all law enforcement agencies–Page Police Department, DPS, and Navajo Police Department–to facilitate communication.

Central to this cooperative effort are the informal relationships developed among individuals. In a small town like Page, key personnel in services for children and youth know each other well, and often a quick phone call can cut through bureaucratic red tape. Issues of jurisdiction, confidentiality and conflicting regulations still arise, but staff from the various agencies work together to ensure such issues do not interfere with service delivery. Agency representatives share information about cases and jointly plan how services should be provided and which agency should take responsibility for certain actvities. Advantages of more formal agreements are being considered, but Stringfellow believes the lack of formality is a strength, and he hopes to avoid a more formal structure unless absolutely necessary. However, Roundtable members are considering developing similar intake and consent forms across agencies to facilitate clearer communicatio n across agencies in the future.

Emily's Story

Emily is 17 and a junior; this is her third year at Page High School. She has a two-year-old child and, at the time of the interview, was past due in giving birth to her second child. She lives about two miles away from school on the Navajo reservation. Her current boy friend works as a waiter and shares the responsibility of taking care of her child. She is on AFDC and receives food stamps through her mother because she is still a minor.

Emily is a success story, given her troubled youth. She has been involved with various social service agencies throughout her life. Prior to Page High School, Emily had been enrolled in a high school in another town, where she and her daughter lived with a foster family. She did not feel wanted in this home however, believing that the family had only taken her in for the money, and she fought her way out of their care. Eventually, she made her way back to Page. Emily encountered more problems in Page. At one point, Navajo Social Services (NSS) was threatening to take her child away for abandonment, because she had left her child with her mother for days on end.

At Page High School, she became enrolled in the In-School Suspension program–a vocational-behavioral modification class. She was referred to this class through the student study team as a result of a long history of fighting and drinking. The program instructor maintains close touch with Emily's probation officer and may call a student study team meeting about her whenever he feels the need. Emily likes the small class size so well that she does not want to leave the program; she finds she can actually learn more and complete school work more easily than if she were in regular classes at the school.

(continued on page 38)

Student Study Teams

Student study teams (SST), composed of teachers, counselors, police officers, ministers and parents, operate on an ad hoc basis, meeting twice a week or even daily to review cases, as necessary. Anyone–teacher, parents, counselor, or even a student–can recommend that an SST be convened. Students are referred for services based upon academic performance, truancy, contact with juvenile services or police, discipline problems, or indication of family problems. The school's student services program has three counselors and three

para-professionals who take responsibility for following up on SST recommendations.

For example, a recent SST considered the case of a Navajo girl who was doing poorly in school and having difficulty adjusting to Page High School. She had previously attended a Navajo Boarding School and did very well there. At Page however, she did not feel safe in certain areas of the school, and her attendance had fallen off dramatically. Two recent events–witnessing an epileptic seizure in class and escaping from a car accident uninjured–convinced her that she had been witchcrafted. The school counselors were also concerned that the girl might be a victim of sexual abuse at home. Through discussion at the SST, arrangements were made to have the girl see the Navajo medicine woman, and to have her see a Navajo counselor at the Lake Powell Institute. Several other options were considered, including performing a ceremony in the classroom to rid it of evil spirits. This option was eventually dropped however, because of the reaction of other students if they heard the ceremony had been performed.

(continued from page 37)

Her NSS case worker initially came to the school to work out problems with her, but now Emily is issued an off-campus pass to visit the case worker off-site. Still, she does not feel comfortable sharing information with her; "I don't talk as much; I just said fine about everything." Ironically, she would rather discuss her problems with a non-Navajo counselor. Because the Navajo community is so small and so tightly knit, she is afraid that what she discusses with NSS might be discussed within the community as well. It is much easier for her to talk with the school counselor, Amy Purdy; "She is like a close friend. She knew my brother; my brother came to school here. Everytime I get stuck she's always there to help me–telling me not to let anyone get me down. She even helped me with my drinking problem."

At Page, Emily seems to have found herself; "Now I've changed–I've matured. Pregnancy taught me to be responsible–not to drink, not to smoke." In spite of all her past personal and academic problems, she is now committed to completing her high school education. As she said, "I want to finish school. At least I'll have a diploma to show when looking for a job."

In-School Suspension

In-School Suspension (ISS) is another key component of the student services program. Instead of suspending students off the school grounds as a punishment for truancy or acting out within the school, ISS provides a quiet, structured setting in which a small group of students can continue their school work and their progress can be closely monitored. The students in ISS need to attend school only for the minimum number of hours required by law. Each day, these 10 to 12 students spend an hour on self-esteem issues and share lunch with the court-appointed counselor in a group therapy session. The students also work on academic subjects at their own pace and receive vocational counseling regularly.

ISS is meant to be a short-term alternative; however, a number of high-risk students have stayed in ISS for months at a time. As illustrated by Emily's and Victoria's stories, some

students actually thrive in a highly structured, small-class program and do not wish to return to the regular classroom.

Rural Informality

In a small rural town like Page, there is no structure established for integrating services. Interagency collaboration can often occur quite naturally because one professional may be working related jobs in two different agencies, or because over the years, individuals may have worked several jobs within several different agencies. For example, a social worker with Navajo Social Services first worked as a probation officer for five years before becoming a case manager for NSS. In other instances, the professionals from different agencies may be married to each other or otherwise related; "interagency" collaboration seems a very natural process.

The same informality also characterizes the initiation and leadership of meetings. For example, a counselor from the student services center took the initiative to organize occasional "professional lunches" so people from various agencies could get to know one another better.

Cross-Cultural Interagency Collaboration

Because of the large population of Navajo students at Page High School, collaboration with Navajo Social Services, Navajo Police and other tribal agencies is profoundly important. Since the establishment of the monthly Roundtable meetings, the relationship between the Navajo and Page agencies has improved tremendously. Agencies are providing staff development on cultural sensitivity issues and procedural issues across community lines. For example, Page CPS is helping NSS remodel its social service programs. As part of this process, the two agencies have developed an intergovernmental agreement which allows CPS, with permission, to protect a child who lives on the reservation, if the school is unable to contact the family immediately after receiving a report.

CHALLENGES

The student services program at Page High School is doing its best to cooperate with all community and Navajo agencies in providing needed services to at-risk students. Page High School does not always take the lead, nor must it be the center of collaboration. The school and the community, nevertheless, still face many challenges that may call for more formal interagency collaboration in the future. With no special funds raised to promote interagency collaboration in this community, much of the cooperation is currently driven by a sense of urgency in trying to fill huge gaps in services to high-risk students and their families.

Rural Isolation

Mental health problems are common among the youth and adults in any community; there is, however, no psychiatric help available in Page or the nearby vicinity. The community is too small, too isolated, and too poor to attract many psychologists or psychiatrists to practice in Page for an extended period of time. Only one psychiatrist regularly comes to Page (every five weeks or so) to provide services, and one of the few drug abuse counselors in Page is moving back to Colorado soon. With so few experienced practitioners available in a community this size, the loss of even one staff member can be devastating because the position may remain unfilled for long periods of time.

High Staff Turnover Rates

The turnover rate for practitioners is high for both Page and the tribal offices. The often-cited reason is that staff burnout occurs quickly because there are few resources or professional networks like those readily available in larger communities. A high staff turnover poses a real challenge for interagency collaboration. Too often the Roundtable is made up of new faces and the re-education that this entails, and the advantages gained from having a small rural cadre of mutually supportive professionals may soon disappear if this trend continues. More formal protocols for action across agencies may eventually have to be institutionalized to counteract lack of continuity in staffing.

Victoria's Story

Victoria, a gum-chewing 15 year old, lives with her mother, step-father, and five siblings. Altogether she has 12 brothers and sisters. She is new to Page, having moved from Kansas a year ago, and is already planning to move to Colorado next year to join her older sister there. After school, Victoria works at the soda fountain of a local drug store 12-20 hours a week. She dreams of being a housewife, a model, or getting a degree in psychology or business management. She wants to do it all.

Like Emily, Victoria was also referred to the in-school suspension program, in her case, for persistent truancy. She says that she ditched classes because she could not stand the constant teasing from her classmates. Like Emily, Victoria likes the class for its small size and shorter hours. She believes she is learning more there. She admits to being totally infatuated with a fellow male student in this class and, like so many other girls her age, spends a lot of time and energy trying to get his attention.

Victoria talks about the difficult relationship between herself and her mother, noting that she has been seeing psychological counselors since she was eight years old. She recalls the story of how her mother reported her to the police when she left home one day after an argument. She claims that it was her mother who pushed to have her put on probation. Though Victoria still sees a counselor once a week at the guidance center in town, she plans to quit after one more visit; "I don't think I need it any more."

She actually likes Page High School because it is "more mellow--no bars, no security guards, no one banging your head against the lockers," as in her previous high school. She doesn't think a high school diploma means much, but knows that "with one, it's easier to get a job."

Jurisdictional Restrictions

Jurisdiction is another problem. Because Navajo law sometimes conflicts with Arizona law, developing a system for the community where all agencies can work smoothly with one another is a challenge. When jurisdictional restrictions are combined with a lack of services in the community, service delivery is next to impossible.

The substance abuse counselor from the Lake Powell Institute, for example, related the story of a Navajo youth who attempted suicide in the city. The CPS worker in Page couldn't touch the case because of jurisdictional mandates. The hospital in Page couldn't admit the boy because it is not licensed to handle mental health cases for

adolescents. So the substance abuse counselor, a Navajo, was called to drive the boy over an hour away to Tuba City on the Navajo reservation. The hospital there admitted the boy, and Tuba City agreed to pick up the tab. But then the doctor said the boy needed to be under psychiatric care, which involved flying him still further away to a place where such care is available. In order to receive the care this youth needed, several critical hours were wasted just trying to get him connected to appropriate services, and even then, this was only possible far from his home and support network.

Cultural Diversity

Culturally-different interpretations of rituals, ceremonies, education, and family responsibilities also create difficult challenges for interagency collaboration in serving high-risk students. For example, the NSS case manager remarked that a common referral to her agency is from someone off the reservation complaining that a Navajo child's clothes are dirty. Those living off the reservation do not always understand the circumstances and values of those living there. Many Navajo have no running water and little income, which means that families have few clothes and no washing machines. In addition, part of the importance of growing up as a Navajo is "getting tough," which requires heavy physical activity for young people in their community. The combination of the Navajo living situation and their cultural values means that clothes get dirty and are not necessarily replaced with clean ones everyday. It is a constant struggle for agency representatives of both cultures to educate those around them and make decisions about how and under what circumstances to deliver services appropriate to each culture.

In a small rural community like Page, the coming together of various community and Navajo agencies to serve at-risk students is important for the overall well-being of the community and its residents. Page High School is well on its way to becoming a comprehensive community high school in spite of various challenges ahead. With strong leadership and dedicated professionals, funds may be secured to help move the present "cooperation" into a closer "collaboration" and, thus, provide a tighter safety net for the youth at risk.

COORDINATED YOUTH SERVICES COUNCIL SAN RAFAEL, CA

OVERVIEW

Located just north of San Francisco and encompassing the affluent communities of Sausalito and Mill Valley, Marin County is one of the wealthiest, whitest counties in the west. However, it is not as homogenous as it appears. Amidst the hills and valleys north of the Golden Gate Bridge are communities where severe poverty and economic strife equal that of any major U.S. city. Marin City and "the canal" are enclaves of poor White, African-American, and Hispanic families, plagued by high rates of unemployment, crime, and drug use. Hard economic times in combination with rising unemployment are adding to the strains of the already burdened public social service system in the county. Many of those living in poverty or needing increased services are families with children.

The Coordinated Youth Services Council (CYSC) was established in 1987 to address the social service and treatment needs of children, youth and their families in Marin County. The public and private agency representatives who established CYSC were particularly concerned with reducing program fragmentation and duplication, as well as identifying service gaps in the county. By developing a multi-disciplinary case review process, CYSC focuses on families that the existing system has been failing: those with multiple problems who are involved with more than one service delivery system. Among these families, abuse and neglect often threaten court-ordered removal of children, children have been convicted of a crime or are severely emotionally-disturbed. Many of these families are at risk of having their children placed in foster homes, residential treatment programs or detention facilities. The mission of CYSC therefore is to develop a coordinated system that provides centralized intake, comprehensive assessment, and intensive case management to families with multiple needs who understandably have difficulty navigating their way through fragmented services.

Funded as a three-year pilot project by the Marin Community Foundation, CYSC is a private, non-profit agency composed of five public agencies (Social Services, Mental Health, Probation, Public

Health, and Education) and sixteen private service organizations. Several of the public agencies provide staff to the collaborative, while others contribute staff time for meetings and case review sessions. Twelve staff work out of CYSC's small, bustling office in San Rafael and have coordinated services for 73 families over the past two years.

CRITICAL FEATURES

The CYSC model intentionally blurs the distinctions between individual agencies in an effort to reshape the way county agencies view and provide services for their clients. By means of a case review process and intensive case management, CYSC helps the county's agencies establish more cooperative ways of providing services through a culturally-sensitive, family-centered approach that coordinates existing services and resources to meet the specific needs of its clients. The co-location of staff and sharing of information among agencies facilitate this process.

Case Review Process

As the cornerstone of the CYSC program model, the case review process consists of weekly meetings of an interagency team–an ad hoc group of CYSC staff, four public agency case managers co-located at CYSC, and various staff from the public and private agencies that are involved with family members. Often as many as twenty or more persons participate in the case review, reflecting the many needs of the families and their involvement with several different agencies. Typically, two family cases are discussed at each meeting, with the relevant participants taking part in either or both discussions.

Any of the five public agencies involved can refer an eligible family to the CYSC collaborative. The referring worker must first get the family to agree to receive CYSC services and sign a release form that allows CYSC members to share confidential information. The worker and the family discuss the family's needs and goals and the worker then brings this information to the initial case review meeting where staff from other agencies also present information they have about the family. With the information gathered at the case review meeting, the team decides whether or not to accept the family for CYSC service planning.

If the family is accepted, a service plan is developed by the case review team. The team must reach consensus on this service plan in order to take the family on as a client. Each member of the case review meeting, regardless of their agency affiliation, has an equal voice in reaching a consensus decision.

Once the team develops a preliminary plan, a lead case manager is assigned and a subcommittee is formed to present the plan to the family for its approval. While some aspects of the service plan are negotiable, others are not. The lead case manager and the committee work with the family to develop a service plan to which everyone can agree. When finalized, the case manager will begin to implement the service plan, advocate for the family within the system, and ensure that the family members receive the services they need. More specifically, the case manager may counsel the family on a regular basis, broker services, and provide information and referral as needed. The family's progress is reviewed periodically by the team; at least once every six months.

While it is not unusual for interagency collaboratives to have some kind of case review process, what is unique about the CYSC approach is the shear number of service providers involved in these meetings. Because CYSC takes a whole-family approach, each member of the family may be represented by several professionals from different disciplines who work together to describe the family history and analyze their situation. The range and depth of information provide the foundation for developing a tailor-made service plan. With this multi-disciplinary approach, members of the case review team can report the outcomes of prior interventions and strategies; those that failed in the past can be avoided and potentially successful ones selected.

Benefits

According to staff involved in the CYSC project, a multi-disciplinary case review process improves the service plan developed for the family and produces more desirable outcomes. Because there is so much input, especially from private agencies that are less restricted in their service options and treatment orientation, the case review process tends to lead to the development of a more creative service plan. While public agencies contribute a great deal of critical expertise in such areas as the legal system, private organizations contribute fresh perspectives on how to serve clients and tend to be more family-oriented in their service approach. This integrated approach also guards against narrow-minded and biased service planning. For example, when out-of-home placement is an option under consideration, a case worker might come to the review with a particular set of biases, but the group process provides a forum for multiple perspectives on the case and shared responsibility for the final version of the service plan.

The involvement of so many agencies also expands the number and range of services available to clients. CYSC is able to secure intensive treatment for the family that a single public agency, due to budget constraints, could rarely provide. The input of private agencies lends more flexibility to the decision-making process; they have fewer regulations dictating their treatment approach and how money can be spent.

The case review process is of course very expensive. Involving several professional staff in service planning for one family is very costly compared to traditional case management. But the staff involved in the CYSC process are convinced that this will prove to be cost-effective over the long term. Traditional approaches have not proven to be effective for these families; CYSC hopes that the positive results of providing such intensive front-end services will justify the cost. Because the model attempts to keep families intact and youth out of foster homes, residential treatment facilities, and prison, the cost of intensive outpatient services is considered minor compared to these other possible outcomes.

Intensive Case Management System

Each family client of CYSC receives services through intensive case management. In this way, CYSC ensures that families get precisely the services they need, with little duplication or conflicting service plans.

The target population for CYSC services are the families of children ages five to eighteen who have multiple problems and require multiple services to

meet their needs. The focus on the whole family reflects CYSC staff's belief that the problems children have are often indications of larger problems within the family. Since one of the goals of CYSC intervention is to keep families intact whenever possible, they work with all members of the family, not just the children.

CYSC was designed to serve the neediest, "worst case" families. The strategy is to select only those families already involved with several public agencies; in fact, in order to be eligible for CYSC services, a family must be "active" to at least two of the five public agencies involved with CYSC. Of this group of candidates, CYSC primarily serves what Director Lin Barrett describes as "75 percent families"—those that service providers agree have serious and multiple problems, but are not entirely beyond hope of recovery.

Edouardo's Story

Edouardo is the fourteen-year-old son of a Filipino mother and Latino father who have been divorced since he was two years old. He is highly energetic, and enjoys working and sports. He is very artistic, and also has a good sense of humor. However, according to his teachers and other adults who know him, he is a perfectionist and does not tolerate mistakes. He also has a need to be the center of attention. Edouardo is oppositional and gets angry very often; when this happens, he doesn't remember the incident later.

Edouardo tests very high in cognitive and verbal ability, but has had severe academic problems for the last couple of years. He has had chronic behavioral problems in the classroom throughout his schooling, although his caseworker believes this is related to environmental and learned causes, rather than organic ones. Edouardo was referred to Coordinated Youth Services Council (CYSC) by Juvenile Probation and the County Office of Education because he was constantly running away from home and acting out, and there was concern that he was becoming involved in gangs and drug use. At the time he was referred to CYSC, he was on probation and attending a court community school.

Edouardo lives with his mother. She has a heavy metal band and is often out of town, so Edouardo stays over at the home of another family, with whom he would like to live permanently. As a child, Edouardo's mother was abused by her mother and has low self-esteem and poor parenting skills. For example, when she gets upset, she will often lock herself in her room for hours. She has remarried now, and she and her new husband both blame Edouardo for disrupting their lives and contributing to their marital problems. Edouardo's biological father, who divorced his mother when Edouardo was three years old, has been in and out of jail and has not visited for a long time, but recently expressed interest in visiting when Edouardo was in Juvenile Hall.

A case review meeting was held to discuss possibilities for helping Edouardo and his family. After hearing his case from the probation officer, and a subsequent discussion among other agency staff familiar with family members, the CYSC case review team came up with a preliminary treatment plan, subject to the family's approval. The plan includes the following goals: 1) try to keep Edouardo in the home rather than placing him in an institution; 2) maintain him in an academic setting; and 3) help Edouardo learn to control his anger. As part of their case

(continued on page 46)

Because more than 80 percent of the families they work with have members with severe substance abuse problems, CYSC staff find that intervention rarely results in steady improvement. Often, the family's situation deteriorates soon after CYSC intervention begins. According to Barrett, staff have learned to welcome crises such as an arrest because it forces

family members to confront the reality of their situation. Although the families frequently are in denial about some or all of their problems, CYSC staff often manage to "hook" them into wanting to improve their situation once such a crisis occurs.

Selection and Role of the Lead Case Manager

Because there has not yet been sufficient formal cross-training of staff, the lead case manager is, in most cases, the staff person from the public agency who referred the family to CYSC and/or is most familiar with the family. Ideally, all CYSC case managers will eventually know enough about cross-agency procedures and disciplines that their agency of affiliation will not be an important factor in the selection of the lead case manager. Another primary consideration in selecting a lead case manager is to match the family with someone from the same or similar cultural background. CYSC strives to provide "culturally competent" services to its clients to ensure that the family feels comfortable with and understood by those providing and coordinating services for them.

The lead case manager coordinates services for family members, implementing the service plan formulated for and agreed to by the

(continued from page 45)

plan they decided to have a therapist further assess the family needs and advise CYSC workers of ways to help break destructive patterns within the family. They also assigned a temporary case manager to coordinate the case, obtained academic and psychological test results from the Department of Education, and recommended to the court that the family be ordered to cooperate with the CYSC plan.

The family was presented with the plan by several key members of the CYSC case review team; a family resource specialist from CYSC, the probation officer, a staff person from the Marin County Office of Education, and a therapist from St. Vincent's School for Boys. The family agreed to the case plan, and the probation officer was assigned as the lead case manager.

Since the initial case plan was developed, several actions have been taken. Edouardo has had weekly contact with the family resource specialist at CYSC who has a lot of experience dealing with substance abuse cases. He and his mother have also been involved in weekly family counseling sessions, and his mother and stepfather have had several couple's counseling sessions. Counselors have focused on improving the relationship between Edouardo and his mother, as well as helping his mother develop better parenting skills. During the summer, Edouardo attended art school, which was a great boost for him. The therapist's impression is that Edouardo and his mother have both worked very hard at this, but there are still many unresolved issues. Although Edouardo would like to play football, which is possible only in a regular high school, the CYSC team is concerned that he is still too argumentative and will be kicked out of any regular high school within the first month or so of the semester because of his temper.

The second case review of Edouardo and his family six months later resulted in re-clarification of goals, given the family's progress. Focus has shifted somewhat to increasing the stability of Edouardo's mother's and stepfather's relationship, helping Edouardo clarify his cultural identity, and keeping him in school. The recommendations are to continue individual therapy for Edouardo, obtain more intensive couples therapy for the mother and stepfather, explore school placement options for Edouardo and continue his involvement in art classes. The CYSC case review team hopes that with some more progress, Edouardo can attend a regular high school at least part-time and be given the opportunity to play football as he had hoped, which will provide an additional incentive for him to stay in school.

family. He or she maintains regular contact with family members as well as with the agencies and programs serving them. The case manager makes sure that family members are keeping their appointments and decides whether to use CYSC funding for goods and services that the family cannot secure otherwise. He or she also determines whether the plan is sound by constantly reassessing the needs of the family and the match of services.

Purchase of Goods and Services for Families

One of the special features of the CYSC collaborative model is their sizable discretionary fund for purchasing goods and services that might otherwise be unavailable to families. Out of the annual $375,000 grant from the Marin Community Foundation to fund the program (for each of three years), approximately $100,000 is allocated exclusively for purchasing goods and services for clients as needed for their treatment. This money can be used to purchase anything the lead case manager or the case review team believe would benefit the family, including services not covered by insurance or offered by an agency, or material items that the family cannot afford to purchase. CYSC has spent money on neurological testing, psychotherapy, substance abuse treatments, and dual diagnosis assessments, as well as rent, utility bills, clothing, and haircuts. In addition, a considerable amount has been spent on incentives. For instance, a family may be paid a set amount each week if family members attend all their therapy appointments or meet their service plan objectives in some predetermined way.

CYSC staff and the case review team have wide discretion in using the funds, and are encouraged to be creative. The only stipulation is that staff must document that for any goods or services they seek to purchase, no (free) alternative is available. While the entire case review team must approve the plan for large expenditures, decisions about smaller amounts are generally made by the lead case manager in conjunction with the CYSC executive director. Barrett notes that the impact of this fund goes beyond the actual number of dollars spent. The kinds of services they can provide for clients has expanded because as staff have gone through the process of justifying use of the discretionary fund, they have honed their skills in accessing services. She notes that CYSC has not come close to using the full annual allotment, because the staff have been so conservative about spending this money.

Co-Location of Staff

CYSC originally planned to have on site a full-time case manager from each of the participating public agencies, thereby facilitating communication and information-sharing among staff. However, implementing this program design has proven to be more difficult than anticipated. While full-time case management staff from the Department of Social Services (DSS) and Community Mental Health (CMH) have been on site at CYSC for over a year, staff from the other two agencies–Probation and the Department of Public Health–have only recently come on board, and are only on site half-time. Moreover, CYSC was only able to bring these staff on site by agreeing to cover their salaries. This is not an ideal solution, as CYSC would prefer all agencies to be represented equally, and cannot afford to finance staff time indefinitely. An additional concern is that an imbalance in power and possible resentment might develop between agencies, due to their different

levels of contribution to the project. CYSC staff hope that the current solution will be temporary and that probation and health will commit more to the collaborative as they become more actively involved.

Co-locating staff on site at CYSC carries several important benefits. First, because service plans require different agency staff to be intensively involved with members of one family, having a staffing arrangement that facilitates continual communication among members of the service team better serves the family. CYSC case loads are high and the staff are very busy; informal communication can bridge the gap between less frequent formal meetings about a family's progress. Similarly, each staff person regularly contributes notes and updates to the family's case folder, which in turn ensures that all staff have current information on the family. Finally, having all the involved public agency staff on site together allows for the informal cross-training of staff across agencies and across disciplines. Co-location will of course also make formal cross-training even easier to schedule and implement.

This integration of agency staff is already having some effect on the quality of work done by caseworkers within the public agencies. DSS and CMH supervisors see themselves suggesting a more multi-disciplinary approach to their caseworkers at their home agencies, even when the cases are not specifically CYSC cases. They hope eventually to create multi-disciplinary teams within their home agencies to facilitate this level of communication. In addition, public agencies are seeing the efficacy of providing services oriented to the whole family, rather than individual clients. According to agency supervisors, another effect of combining agency input is that it is helping to humanize the families being served, so that staff see "people" rather than "cases."

The co-location of staff has some inherent difficulties as well. Public agency staff on site at CYSC feel somewhat isolated from their professional peers at their home agencies. Although working with staff from different disciplines is stimulating, they miss having colleagues with similar training and orientation. This is particularly true of the staff from CMH and DSS, since they are on site full time at CYSC and have little regular contact with their home agency colleagues.

Co-location can also create ambiguity in staff roles, causing discomfort for staff from agencies where roles are concretely defined. Since one purpose of relocating staff is to expand the roles of caseworkers through continuous interaction with staff from other agencies, CYSC must figure out how to balance this "blurring of distinctions" with the attendant confusion for individual staff members.

Concurrent Supervision

CYSC public agency staff on site are supervised by both their agency supervisor and the clinical supervisor of CYSC. "Concurrent supervision" is designed to ensure that the mission and priorities of both agencies are maintained by the caseworker and provide the checks and balances needed to ensure adherence to each agency's regulations and mandates.

While concurrent supervision helps promote "seamless" services, it has its limitations. Being supervised by two different people, each representing a

different agency perspective with its specific set of priorities, can be very stressful for staff. Despite the enthusiastic endorsement by public agency supervisors of the concept and approach of CYSC, conflict sometimes arises over the best way to implement a service plan for a particular family. This might be expected, given that each agency has an established mandate and system of operation. Unfortunately, the caseworker can get caught in the middle.

Dual supervision is also time-consuming. For the caseworker and the two supervisors, it represents at least one more meeting per week that must be fit into their already busy schedules, and can often mean significantly more time in case consultations. However, the staff involved all agree that the benefits outweigh these costs. Moreover, as the system evolves and agency staff gain more experience working collaboratively in this way, these problems will likely diminish.

Interagency Information-Sharing

One of the goals of CYSC is to design a county-wide system for sharing client information among all the public agencies providing services to CYSC families. To this end, each CYSC member agency signed a confidentiality agreement which allows them to share information about their clients. A coordinated, computerized management information system would facilitate the planning and treatment process, because agency staff would have access to more complete information regarding the services and agencies with which clients have been involved, and what the outcomes had been. A common information system would also enhance the quality of communication and coordination between the staff of the various agencies working with the particular client or family.

CYSC maintains case files on each family that contain information and notes from the various agencies working with family members. Much of these data will be eventually included in a large interagency database. When completed, the data base will contain biographical data on family members, demographics, descriptors on each family member, the original service plan with subsequent updates and revisions, and a record describing the involvement of other county agencies.

CYSC is looking for funding to create such a unified system across county agencies. To this end, it is in the process of selecting a computerized management information system for the database and determining how to accommodate the needs of the various agencies that would use it. CYSC staff had originally hoped that they would be able to institute one data base that would be used as their active file, eliminating the need for a duplicate paper file for clients and making it easier for collaborating agencies to access the system. However, they soon discovered that this plan would be hampered because few agencies were keeping computerized information on their clients. In fact, some even lacked agency-wide paper records. Of the agencies that did have computerized data bases, only Probation was using it in their daily operations. CYSC decided to adopt Probation's data base program because it was already in place and would help CYSC "blend" with at least one agency. In addition, of the data bases being used, Probation's had the most data elements, and CYSC staff thought each agency could simply add on extra categories as needed.

Unfortunately, after spending several months training staff to use this data management system, it was concluded that the system would probably not meet the needs of the collaborative. CYSC had been hoping to use the database that was to be developed for a statewide (Healthy Start) program initiative, but that has been delayed. Dismayed at having waited for several months when CYSC could have been developing its own database, Barrett notes that one of the unfortunate consequences of collaboration is that being flexible and accommodating can sometimes result in wasted time, effort, and precious resources.

In addition, individual agencies have not yet fully resolved how parallel records will be kept without some duplication, especially since each agency has developed a different system for compiling data. The lack of computerized, agency-wide data means that in some cases CYSC cannot even determine which agencies are working with the same families, highlighting a significant barrier to improving coordinated services.

For now, CYSC continues to struggle along with Probation's database program. It has recently hired someone to do data input because it proved too time-consuming for other staff who had not adequately learned the system. CYSC is still trying to determine whether or not to find a more user-friendly system to adopt, in which case everything input so far will have to be transferred. Once this decision is made, CYSC will have to determine protocols for sharing and accessing computerized data among agencies.

CHALLENGES

Several issues face CYSC which it must grapple with and resolve if it is to meet continued success. First, CYSC must secure funding for continued operation, which will require that the project demonstrate the cost-effectiveness of its expensive, front-end services. CYSC must also resolve how it will utilize staff from other agencies, and whether it will continue to pay the salaries of public agency staff not provided by those agencies. Finally, CYSC must examine the issue of staff burnout, and decide on realistic caseloads, as well as the level of report writing and other duties expected of staff.

Securing Future Funding

The CYSC program model is expensive. The intensive case management combined with the overall cost of having so many professional-level staff involved in the case review process incur program expenses much higher than traditional public social services. Thus, CYSC has to demonstrate that this program model is saving the county money it would spend on these families. Even if it can prove its claim that providing these families with front-end services saves hundreds of thousands of dollars, CYSC will need to make a very strong case in order to convince funders to think in terms of long range savings. It will certainly be necessary to get the public agencies to invest in the program and to advocate for the continued operation of the CYSC model.

Choosing an Interagency Staffing Model

As noted earlier, CYSC was originally designed with one full-time staff person on site from each of the public agencies. For the past year, only CMH and Child Protective Services have relocated staff. Probation and Public Health now have part-time staff on site but do not contribute toward their salaries. Marin County Office of Education has not

contributed staff, but an agency representative has been very involved in the case review process.

It is no accident that staffing developed as it did. According to the supervisors from CMH and CPS, their agencies had the most to gain from taking an active role in CYSC; these agencies have the biggest pool of clients who can benefit from the comprehensive services and resources, as well as the highest costs in trying to provide needed services and resources to their clients.

For CYSC to continue to finance the participation of the other public agencies, it will need to bring in new funding to cover this cost. However, the more desirable strategy is to convince the other public agencies to fully participate in the process. In this way, CYSC will not only be able to test their original collaborative model, but they will reduce any resentment among agencies that has built up over unequitable participation in the process.

Addressing Staff Workloads and Stress

High stress levels and potential for burnout among staff involved in case management is always a danger, particularly within agencies mandated to serve those most in need of help. Although co-located staff at CYSC work exclusively with families with multiple problems, they maintain the same size caseloads they would have at their home agencies. More frequent and intensive staff meetings, case review meetings, and additional report writing add to the caseworker's workload and stress. In addition, CYSC staff are adjusting to the dynamics of working with the entire family and trying to improve their functioning. According to one caseworker–who despite his enthusiasm for the CYSC approach has requested to return to his home agency because he is starting to feel burned out at CYSC–the CYSC approach exacerbates his feeling that he has never done enough for his clients.

According to some of the public agency supervisors of co-located staff, while workloads might be heavier at CYSC, this should not necessarily result in staff burnout. Because the factors leading to burnout–the detachment, repetitiveness, and powerlessness associated with working within a bureaucratic system–are not existent in the CYSC model, they feel that working at CYSC actually prevents staff from burning out; it is a stimulating, dynamic, and creative process where staff can feel effective in helping their clients. Moreover, CYSC staff receive much more in-service training and clinical support than their counterparts working in the public agencies.

What may also be critical in determining whether or not burnout is likely, is the degree to which CYSC supervisors and home agency supervisors can smooth the process for the case manager. Some agencies require a great deal of paperwork and some have legal constraints that they must abide by, both of which can cause difficulty for the case manager who tries to reconcile the demands and policies of two different systems. The process of dual supervision can be stressful for the case manager when the two supervisors too rigidly try to assert their respective agencies' agendas. Finally, CYSC will need to determine a realistic caseload for staff to carry, balancing the quality and intensity of services provided, with the need to help as many families as possible.

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